FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000019983 (0)

FILED Apr 27 1998 8:00am Secretary of State

COOK'S FUTONS, INC.					
				T 1834 INDA AND ARIAY ANDAY BROWN BROWN ARIAY ANDARA W	18:18 18:18 (B.18) (B.18) (B.18) (B.18)
Principal Plac	ce of Business	Mailing Address			
1945 WEST BRANDON BOULEVARD 1945 WEST BRANDON BOU			LEVARD	Į	
BRANDON FL 33511 BRANDON FL 33511				DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualified	
				03/04/1997	
	Place of Businoss	2a. Mailing Address	<u> </u>	4. FEI Number	Applied For
21		26		34-3431825	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		[27]		7 .	Fee Required
City & Sta	16	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29 3	¬ `	This corporation owes or has paid the c Personal Property Tax due June 30.	Yes No
27	9. Name and Address of Curre			10. Name and Address of New Registere	
PUODEC BALLA AL					
	IE HARBOUR PLACE		62 Street Addr	and (B.O. Box Alumber in Alet Assentable)	. (OOK
	ITE 500		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	11/
	MPA FL 33602		B3 (7)	1 (1 2) 275	11
,,,			84 City	CON FI SE 350	B5 Zip Code
			84 City	F	L B5 Zip Code
11. Pursuant to the provisions of Sections 607,0502 apresured 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
11. Pursuant to the provisions of Sections 607 0502 and 807.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Torida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the infigations of, Section 607 0505, Florida Statutes.					
SIGNATURE					
<u> </u>	Signature, typed or photos name of registered ag-		Registered Agent signature require		
12.	DPVTS OFFICERS AN	ID DIRECTORS DELETE	13. 11 TITLE	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
RAME	2100011011				C Charge C Addition
STREET ADDRESS	MAKSHILL C	OOK O	1.2 NAME 1.3 STREET ADDRESS	7	
CITY-ST-ZIP	MARSHALL CO 51645. BRANDE SARATOTA FC	2 42 42	1.4 CITY-ST-ZIP		
TITLE	Stike to the 1 c.	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS		;	3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP	- Fair	
TOTLE		☐ DELETE	4.1 TITLE	·- 	☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS		i	4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TIFLE		Change L Addition
NAME	1		5.2 NAME		
STREET ADDRESS	}		5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addison
TITLE		☐ Dereie	6.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP	Learnify that the information supplied w	with this filing does not qualify for t	6.4 CITY-ST-ZIP he exemption stated in :	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

indicated on this annual report or supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this eport as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.