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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000054334

1. Corporation Name

BILLY BOY COOKIES, INC.

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90120 015 ***158.75



Principal Place of Business Mailing Address							tit dåtit adiat sit)) ! #!### '''	
2425 N.W. 116TH TERRACE 2425 N.W. 116TH TERRACE CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065									
OOMAL OF THE	0.12.0000	00.0.2	J. 1.11,00 , 2 4444			DO NOT WRI	<u>TE IN THIS S</u>	PACE_	
						 Date Incorporated or Qualifed 06/17/1998 			
2. Principal Pl	ace of Business	2a. Mail	ing Address			4. FEI Number		. X A	pplied For
	WILES ROAD		zaz wil	165	ROAD			N	ot Applicable
Suite, Apt.			e, Apt. #, etc.			5 Certificate of Status Desired	123	\$8.75	Additional
22 501	TE 114	27 5	vite 1	14		5. Certificate of Status Desired	<u> </u>	Fee R	equired
City & State	,	City	& State		•	6. Election Campaign Financing		\$5.00	May Be -
23 CORB	I SPRINGS, Fl.	28 C c	ORAI SPI	21NG	s, F/.	Trust Fund Contribution		Added	to Fees
Zip	Country	Zip		Country	у *	8. This corporation owes the curr	-		
24 336	267 25 U.S.A.	29 3	30673	<u>ر) اه</u>	S.A.	Personal Property Tax.		☐ Yes	⊠No
	Name and Address of Curren	t Registered	l Agent			10. Name and Address of New I	≀egistered A	gent	
				81	Name				
BRAUN, FREDERICK C				82	Street Add	ss (P.O. Box Number is Not Acceptable)			
1 NORTH OCEAN BLVD: SUITE ONE				-				·	
BOC	A RATON FL 33432			83	3	-	_		
					J Cit.	<u> </u>		85 Zip	Code
				84	City		FL	65 Zip	Code
11 Pursuant 1	to the provisions of Sections 607.050	2 and 607.15	08, Florida Statutes	, the abov	/e-named corp	poration submits this statement for the	purpose of c	hanging its	s registered
office or re	egistered agent, or both, in the State	of Florida. St	ich change was aut	horized by	the corporati	on's board of directors. I hereby accep	ot the appoint	ment as re	egistered:
agent. i ai	m ramiliar with, and accept the obliga-	HOFIS OI, SECI	1011 607.0303, Florid	a Statute	.	•			
SIGNATURE	Signature, typed or printed name of registered ager	t and title if applic	able. (NOTE: R	egistered Age	ent signature require	ed when reinstating)	DATE		
12.	OFFICERS AN			13.		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECT	ORS IN 12
TITLE	D		☐ DELETE	1.1 TITLE			_	Change	☐ Addition
NAME	PILAVAKIS, NICHOLAS X			1.2 NAME					
STREET ADDRESS	2425 N.W. 116TH TERRACE			1.3 STREE	ET ADDRESS				
	CORAL SPRINGS FL 33065			1.4 CITY-					
CITY-ST-ZIP TITLE	0017/2 017/11/00 12 00000		DELETE	2.1 TITLE	VI-EI			Change	Addition
NAME			_	2.2 NAME					
J					T ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP			☐ DELETE	2.4 CITY- 3.1 TITLE	51-ZP	<u> </u>		Change	Addition
TITLE						·	34 A A Laur		
NAME				32 NAME					
STREET ADDRESS					ET ADDRESS				
CITY-ST-ZIP			□ nci crc	3.4. CfTY-	ST-ZIP			☐ Change	☐ Addition
TITLE			☐ DELETE	4.1 TITLE					
NAME				4.2 NAME	i	•			
STREET ADDRESS					ET ADDRESS				
CITY-ST-ZIP			- Delete	4.4 CITY-	ST-ZIP			. C Char	□ Addision
TITLE			☐ DELETE	5.1 TITLE				· Change	☐ Addition
NAME				5.2 NAME					
STREET ADDRESS				1	ET ADDRESS				
CITY-ST-ZIP		_		5.4 CITY-					
TITLE			DELETE	6.1 TITLE			•	Change	☐ Addition
NAME				6.2 NAME		•			
STREET ADDRESS				6.3 STREE	ET ADDRESS				
CITY-ST-ZIP				6.4 CITY-	ST-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 report 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, with all other like empowered.

SIGNATURE: