

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F27018 (3)

1. Corporation Name

COCOMO ENTERPRISES, INC.



Principal Place of Business

19353 U.S. 19TH NORTH
STE. 100
CLEARWATER FL 34624
US

Mailing Address

P. O. BOX 6600
CLEARWATER FL 34618
US

3. Date Incorporated or Qualified

03/26/1981

3a. Date of Last Report

03/21/1995

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COPE, RICHARD
19353 U.S. HIGHWAY 19 NORTH
STE. 100
CLEARWATER FL 34624

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 Florida. 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent or the corporation's officer or director

Signature of the person who is the registered agent or the corporation's officer or director

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME	2. STREET ADDRESS	3. CITY, ST, ZIP	4. TITLE	5. DELETE
COPE, RICHARD W.	19353 U.S. HIGHWAY 19 NORTH, STE. 100	CLEARWATER, FL 00000		☐
				☐
				☐
				☐
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				☐

1. NAME	2. STREET ADDRESS	3. CITY, ST, ZIP	4. TITLE	5. DELETE	6. CHANGE	7. ADDITION
				☐	☐	☐
				☐	☐	☐
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				☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER, OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (12/95)