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May 28 1998 8:00am
Secretary of State

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PROFIT CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # V67157 (0)
1. Corporation Name
COBRA CAPITAL, INC.

Principal Place of Business: 915 MIDDLE RIVER DRIVE, SUITE 506, FORT LAUDERDALE FL 33304
Mailing Address: 915 MIDDLE RIVER DRIVE, SUITE 506, FORT LAUDERDALE FL 33304

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: 09/25/1992
4. FEI Number: 65-0365053
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 owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc., 22 City & State, 23 Zip, 24 Country
2a. Mailing Address: 26 Suite, Apt. #, etc., 27 City & State, 28 Zip, 29 Country, 30

9. Name and Address of Current Registered Agent
MORAITIS, GEORGE R.
915 MIDDLE RIVER DRIVE
SUITE 506
FORT LAUDERDALE FL 33304

10. Name and Address of New Registered Agent
81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 5 rows and 2 columns: OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Row 1: DPST, DUNAYER, HERBERT, 19173 SABAL LAKE, BOCA RATON FL 33434.

Table with 5 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP. Includes handwritten numbers 800002540978, -05/29/98-01067-040, and ***150.00.

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.

SIGNATURE: *Herbert Dunayer* 4/23/98 952-5703-4160

CR2034 (10/97)