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

CORPORATION ANNUAL REPORT

1998

TITLE

STREET ADDRESS



FLORIDA DEPARTMENT CESTATE Sandra B. Mortham

FILED

May 22 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

P94000000431 (4) DOCUMENT #

COBRA EXPORTS CORPORATION

Principal Place of Business 1638 PLUNKETT ST 44 HOLLYWOOD FL 30020	Mailing Address 1638 PLUNKETT ST. #4 HOLLYWOOD FL 33020		DO NOT WRITE IN TH	IS SPACE
U\$	US		3, Date Incorporated or Qualified 01/04/1994	
2. Principal Place of Business	2a. Mailing Address 26		4. FEI Number 65-0457733	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25		Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	Yes No
9. Name and Address of Co	irrent Registered Agent	81 Name	10. Name and Address of New Registere	A Agent
MOTORGA, ADRIAN		o i Name		
1838 PLUNKETT ST		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
#4		83		
HOLLYWOOD FL 33020		00		
		84 City	<u> </u>	
11. Pursuant to the provisions of Sections 607 office or registered aperit; or both, in the agent. I am familiar with and accept the c	.0502 and 607.1508, Florida Statute State of Florida. Such change was a bligations of, Section 607.0505, Flo	es, the above-named corp uthorized by the corporati rida Statutes.	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	or changing its registered appointment as registered
SIGNATURE Constitute Typed or partied name of register		Registered Agent signature require		
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE PO	DELFTE	1 1 TITLE		Change Addition
NAME MOTORGA, ADRIAN	/	12 NAME		
STREET ADDRESS 1638 PLUNKETT ST, #4	<i>√</i>	1.3 STREET ADDRESS		
CITY-SI-ZIP HOLLYWOOD FL		1.4 CITY-ST-ZIP		
TITLE	☐ 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	3 1 111LE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY - ST - ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-SI-ZIP		4.4 CITY - ST - ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
·		5.4 CITY - ST - ZIP		
City-St-ZiP	DELETE	61 TITLE		☐ Change ☐ Addition

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 suppliemental annual report is type 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 goover or trusted endowered 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 officer with an address.

6 2 NAME

6.3 STREFT ADDRESS 6.4 CITY - ST - ZIP