

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008 8:00 am
Secretary of State

01-15-2008 90035 027 ***150.00

DOCUMENT # 398153

1. Entity Name
COBRI INVESTMENTS, INC



Principal Place of Business
**5200 SW 8TH ST.
SUITE 108
CORAL GABLES, FL 33134**

Mailing Address
**P.O. BOX 441743
MIAMI, FL 33144-1743**

DO NOT WRITE IN THIS SPACE



01032008 No Chg-P CR2E034 (11/05)

4. FEI Number
66-0314248

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**REVUELTA, BARBARA Y
5200 SW 8TH STREET STE 108
CORAL GABLES, FL 33134**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRITO, YOLANDA GENERAL PATTON #2219 SANTURCE, PR 00913
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRITO, LOURDES URB LA CAMPINA #84 CALLE 1 Córdoba Park, Buzón 37 SAN JUAN, PR 00926-9637. 400 Bo. Tortugo San Juan, PR 00926-9771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRITO, EDUARDO 536 PLEASANT AVE. HIGHLAND PARK, IL 60035
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lourdes Brito
Lourdes Brito

9 January 2008

(787) 275-8843

Date

Daytime Phone #