SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 JUL -6 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H18015 (8)

1. Corporation Name
COBA CONSTRUCTION, INC.

Principal Place of Business
16155 S.W. 117TH AVENUE #B-10
MIAMI FL 33157

Mailing Address
16155 S.W. 117TH AVENUE #B-10
MIAMI FL 33157

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/21/1984
3a. Date of Last Report: 08/08/1994
4. FEI Number: 59-2444483 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. ☐ — $5.00 May Be Added to Fees
8. This corporation has salary for ... Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 16155 SW 117 AVE
22 Suite, Apt #, etc: B-10
23 City & State: MIAMI, FLORIDA
24 Zip: 33177 25 Country: US

2a. Mailing Address
26 16155 SW 117 AVE
27 Suite, Apt #, etc: B-10
28 City & State: MIAMI, FLORIDA
29 Zip: 33177 30 Country: US

9. Name and Address of Current Registered Agent
COBA, RICHARD
16155 S.W. 117TH AVENUE, #B-10
MIAMI FL 33186

10. Name and Address of New Registered Agent
81 Name: RICHARD COBA
82 Street Address (P.O. Box Number is Not Acceptable): 16155 SW 117 AVENUE
83 B-10
84 City: MIAMI FL 85 Zip Code: 33177

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: Richard Coba — Richard Coba — 6/30/95

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	COBA, RICHARD
STREET ADDRESS	1325 SAN REMO
CITY-ST-ZIP	CORAL GABLES FL
TITLE	VS
NAME	COBA, LOURDES
STREET ADDRESS	1325 SAN REMO
CITY-ST-ZIP	CORAL GABLES FL

13. (additions/changes: blank) ☐ Change ☐ Addition

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(1)(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: Richard Coba
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/30/95 (305) 661-5611

CR2E034 (3/95)