

8/8/01-90003-02

2001 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **J88450**1. Entity Name
TOBER CAPITAL CORPORATION**FILED**
Sep 10, 2001 8:00 am
Secretary of State

08-08-2001 90003 032 ***500.00

09-10-2001 90048 023 ****50.00

Principal Place of Business
**3823 OWENS ROAD
YULEE FL 32097
US**Mailing Address
**1556 3RD AVE.
SUITE 504
NEW YORK NY 10128
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2838795**Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HENDERSON, J. GROVER
3823 OWENS ROAD
YULEE FL 32097**Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **V** ☐ Delete
NAME **HENDERSON, GROVER J.**
STREET ADDRESS **3823 OWENS ROAD**
CITY-STATE-ZIP **YULEE FL 32097**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE **P** ☐ Delete
NAME **DAVIS, WILLIAM**
STREET ADDRESS **3823 OWENS ROAD**
CITY-STATE-ZIP **YULEE FL 32097**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE **S** ☐ Delete
NAME **SIEGEL, JEROME A.**
STREET ADDRESS **1556 3RD AVE., SUITE 504**
CITY-STATE-ZIP **NEW YORK NY 10128**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE **VD** ☐ Delete
NAME **BERGREEN, BERNARD D.**
STREET ADDRESS **3823 OWENS ROAD**
CITY-STATE-ZIP **YULEE FL 32097**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727-01 212-410-7555

CR2E034 (5/01)

Attachment # J88450 A0084179

Jerome A. Siegel
Accountant
1556 Third Avenue, Suite 504
New York, N.Y. 10128
Phone: (212) 410-7555
Fax: (212) 369-5651
E-mail: JASandPH@aol.com

July 25, 2001

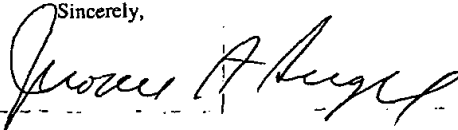
Division of Corporation
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fla. 32302-1500

Re: Tober Capital Corporation
Cordcon Capital Corporation

Dear Sir or Madam:

On behalf of the above Corporations I enclose 2001 Florida Profit Corporation
Annual Report and a check in the amount of \$550 to cover the annual fee.

Sincerely,



Jerome A. Siegel

Enclosure
JAS/jl