FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

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DOCUMENT #

141

1. Corporation Name COBURN HOLDINGS, CORP.												
Principal Place of Business % THOMAS COBURN 6701 S.E. HARBOR CIRCLE STUART FL 34996			Mailing Acid	ress				1 (QD)(Q11 D0) D100 D1210 D1104 110	48 00 31 019 34 1	BYDYK BYDYK BYDYK BYDYK BYDYK END	ı	
			% Thomas Coburn 6701 S.E. Harbor Circle Stuart Fl 34996									
			J. G. W. 1 - 2 - 100 - 1					3. Date Incorporated or Qualified 03/08/1990	3a. Date of Last Report 02/22/1995			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number		Applied For	
21				26					65-0185415		Not Applicab	·le
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required	[
City & State				City & State				6. Election Campaign Financing		\$5.00 May Be		
23				28				Trust Fund Contribution		Added to Fees		
Ζιρ	ļ	Countr	ŷ	Zip		Countr	У		8. This corporation has fiability for intangible tax under s		tax under s 199.032,	1
24		25 and Addre	ess of Current	Registered Ag	ent	30			Florida Statutes Yes No 10, Name and Address of New Registered Agent			
	a. Italiie	and Addin	233 01 0011211	Tregistered reg		81	1 Nar	ne				
COBUR	N, THOMA	s				82	Stre	et Addre	ess (P.O. Box Number is Not Accepta	ble)		
	E HARBO							oc raon				
STUART	TFL 34996	3				83	3					
						84	4 City	 '			85 Zip Code	
	74.	(0	COZ 0500	and 007 1500 F	Tax do Chabata	o the obere	nama	d normar	ation submits this statement for the pu	F		fice
l or registere	ed agent, or	both, in the	State of Florida	and 607, 1508, i a. Such change on 607,0505, Flo	was authorize	ed by the cor	poratio	n's boar	d of directors. I hereby accept the app	pointment a	as registered agent. I am	
	n, and acce	pr me obiig	ations of, Section	л 607.0303, FIQ	nua Statutes							
SIGNATURE -	Signature, typied	or printed Fame	of registered agent a	ere ta sult app Cable	/NO1	le Registracid Au	r r signa	die regare?	l when ou stating)	DATE		
12.		(OFFICERS AND		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	13.		<u>-</u>	ADDITIONS/CHANGES TO OF	FICERS AN	- 	
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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(3)(k). 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 chapter, or on an attachment with an address.

SIGNATURE: ✓

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/96 J 407-725-1317

CR2E034 (12/95)