

APPLICATION
FOR

FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P01000060004

1. Corporation Name

COBRA DEVELOPMENT GROUP, INC.

Principal Place of Business

6329 SW 19TH ST
MIRAMAR FL 33023

Mailing Address

6329 SW 19TH ST
MIRAMAR FL 33023

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/15/2001

5. FEI Number

65-1125718

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSTD	THIBODEAU, DEBRA	6329 SW 19TH ST	MIRAMAR FL 33023

02 UBR

8. Name and Address of Current Registered Agent

~~FILINGS, INC.~~
~~3732 N.W. 10TH STREET~~
~~FT. LAUDERDALE FL 33314 4132~~

9. Name and Address of New Registered Agent

Name

Debra Thibodeau

Street Address (P.O. Box Number is Not Acceptable)

6329 SW 19th St.

Suite, Apt. #, Etc.

City

Miramar

State

FL

Zip Code

33023

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 10-23-02

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Debra Thibodeau

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-23-02 954-322-7646

Date

Daytime Phone #

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COBRA

Development Group, Inc.

6329 Southwest 19th Street

Miramar, Florida 33023

Phone (954) 322-7646 fax (954) 322-8272

Earthwork
Paving & Drainage
Utilities
Site Work

October 23, 2002

Division of Corporations

PO Box 6327

Tallahassee, Fl. 32314-6327

Re: Reinstatement

To Whom It May Concern:

I did not receive any notification of renewal or UBR by mail. Please accept my filling fee of \$150.00, and waive my reinstatement fee.

If you have any question's, please feel free to call me at the above number. Thank You.

Sincerely,



Debra Thibodeau, President