2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000090500

1. Entity Name
COBY EXPRESS, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 552 LADY LAKE, FL 32158	POST OFFICE BOX 552 LADY LAKE, FL 32158

DO NOT WRITE IN THIS SPACE

04242004 No Chg-P CR2E034 (10/03)

4. FEI Number
54-3744048
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

JACOBUS, MORRIS
34548 CR 437
EUSTIS, FL 32736

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when constating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	JACOBUS, MORRIS
STREET ADDRESS	34548 CR 437
CITY-ST-ZIP	EUSTUS, FL 32736
TITLE	DO
NAME	JACOBUS, BETTY
STREET ADDRESS	34548 CR 437
CITY-ST-ZIP	EUSTUS, FL 32736
TITLE	PD
NAME	MORRISON, DANIELLE
STREET ADDRESS	34578 CR 437
CITY-ST-ZIP	EUSTIS, FL 32736
TITLE	VPD
NAME	EISERMAN, JOSEPH C
STREET ADDRESS	34578 CR 437
CITY-ST-ZIP	EUSTIS, FL 32736
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Morris Jacobus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date