2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108521

Entity Name: COBALT SERVICES INCORPORATED

FILED May 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3250 WEST COMMERCIAL BLVD 18455 MIRAMAR PARKWAY

SUITE 250 #126

FORT LAUDERDALE, FL 33309 US MIRAMAR, FL 33029 US

Current Mailing Address: New Mailing Address:

3250 WEST COMMERCIAL BLVD 18455 MIRAMAR PARKWAY SUITE 250 #126

FORT LAUDERDALE, FL 33309 US MIRAMAR, FL 33029 US

FEI Number: 30-0119829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STRIPE, STEVEN T
3250 WEST COMMERCIAL BLVD
SUITE 200
FORT LAUDERDALE, FL 33309 US
STRIPE, STEVEN T
18455 MIRAMAR PARKWAY
#126
MIRAMAR, FL 33029 US

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: 05/27/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 $\label{eq:title:pde} \begin{tabular}{lll} Title: & P/D & (\) Delete & Title: & P/D & (X) Change (\) Addition \\ \end{tabular}$

Name: STRIPE, STEVEN T Name: STRIPE, STEVEN T
Address: 3250 WEST COMMERCIAL BLVD, SUITE 200 Address: 18455 MIRAMAR PARKWAY, #126

City-St-Zip: FORT LAUDERDALE, FL 33309 US City-St-Zip: MIRAMAR, FL 33029 US

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Title: V/D () Delete Title: V/D (X) Change () Addition
Name: BAYSINGER, DARREN T Name: BAYSINGER, DARREN T

Name: BAYSINGER, DARREN T Name: BAYSINGER, DARREN T
Address: 3250 WEST COMMERCIAL BLVD, SUITE 200 Address: 18455 MIRAMAR PARKWAY, #126

City-St-Zip: FORT LAUDERDALE, FL 33309 US Address: 18455 MIRAMAR, FL 33029 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN T. STRIPE P/D 05/27/2006