



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90217 034 ***150.00

DOCUMENT # P03000072364 1. Entity Name COCAM INVESTMENTS, INC.					
Principal Place of Business 1585 AVIATION CENTER PARKWAY, HANGER 601 DAYTONA BEACH, FL 32114			Mailing Address 1585 AVIATION CENTER PARKWAY, HANGER 601 DAYTONA BEACH, FL 32114		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		02242006 Chg-P CR2E034 (11/05)	
Zip Country		Zip Country		4. FEI Number 51-0482465	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent CAMPBELL, JAMES 5918 PEGGY DRIVE PORT ORANGE, FL 32127			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAMPBELL, JAMES 5918 PEGGY DRIVE PORT ORANGE, FL 32127	<input type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 another line empowered.					
SIGNATURE: <u>James Campbell</u> Date: <u>4-24-06</u> Daytime Phone #: <u>386-846-3674</u>					