FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Apr 07 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Socretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P95000011897 (2) COBRA MOTORS, CORP. Principal Place of Business Mailing Address 7068 SW 9 ST 7068 SW 9 ST MIAMI FL 33144 MIAM! FL 33144 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 02/13/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0555833 21 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country $Z_{(D)}$ Country 8. This corporation owes or has paid the current pear Intangible Yes ☐ No 24 25 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERNANDEZ, ODALYS 7068 SW 9 ST Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33144** 83 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registered agent and to nit applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change FERNANDEZ, ODALYS NAME 1.2 NAME 7068 SW 9 ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-S1-ZIP TITLE SVD DELETE 2.1 TITLE Change Addition GIL, NERY NAME 2.2 NAME 7068 SW 9 ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST- ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME

14. 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 annual report or supplieriental 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 changed, or or attachment with an address.

SIGNATURE:

Y 2/30/4 8 (301) 266-975/

5.3 STREET ADDRÉSS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

STREET ADORESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

DETETE

Change

Addition