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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # P95000016686 (4)

COT MANAGEMENT, INC.

Mailing Address

FILED Feb 05 1997 8:00am Secretary of State

954-432-6924 Dayling Prope #



4250 SW 152N MIRAMAR FL 3		4250 SW 152ND AVE MIRAMAR FL 33027-3363			
		,		3. Date Incorporated or Qualified 02/27/1995	3a. Date of Last Report 04/16/1996
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 4 6	50 SW 151 AVE	26		65-0648158	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stay	WAL FL.	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 Zip 730	127 PEOWALD	I I	Country		【Yes ☐ No
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Rec	istered Agent
VELAR, CHERYL L 4250 SW 152ND AVE MIRAMAR FL 33023 81 Name VELAR, CHERYL L 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City KILANAR FL 85 Zip Co					
11. Pursuant to the provisions of Sections 607.0502 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. I am familiar with, and accept the obligation, of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature Type I or pointed rad as of region red algorithms applicable. (NOTE: Registered Agent signature required when reinstating). DATE					
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TOLE		Change Addition
NAME	VELAR, CHERYL L		1.2 NAME		,
STREET ADDRESS	4250 SW 152ND AVE		1.3 STREET ADDRESS		
CITY+S1+ZIP	MIRAMAR FL 33023		1.4 CITY - ST - ZIP		33027
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - S1 - ZIP			2. 4 City-St-ZiP		
TIILE		[_] DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - S1 - 7(P			3.4. CITY-ST-ZIP		
Tillé		[] DELETE	4.1 TITLE		Change Addition
NAME		•	4. 2 NAME .		
SYREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP		LOSISTS	4.4 CITY - \$T-ZIP		About 1 Adams
TILLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREEL ADDRESS			5.3 STREET ADDRESS		
CITY-S1-ZiF		Charlete	5.4 CITY-ST-ZIP		[] 6k
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS	•	
CITY-ST-7IP	are and for that the information and and	with this fitnes do 19	6.4 CITY-ST-ZIP		
information Lam an of	in indicated on this annual report or suc	iplemental annual report is true è receiver or trustee empowers	e and accurate and that ad to execute this reno	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal rt as required by Chapter 607, Florida St	affect se if made under noth that I