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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000080267 (4)

COBRE CENTRAL CORP.

Principal Place of Business

Mailing Address

FILED May 05 1998 8:00am Secretary of State



	STREET BAY 5 BEACH FL 33407	1100 25TH STREET BAY 5 WEST PALM BEACH FL 33407						•
						DO NOT WRITE	IN THIS SPACE	
		,				3. Date Incorporated or Qualified 10/18/1995		
	Place of Business	2a. Mailing Address		λ	4. FEI Number	A	pplied For	
21		26 100 Machen Sact Au		101	65-0624873	N	lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 7	Additional lequired	
City & State		Cwy & Strate	1/			6. Election Campaign Financing		May Be
23		28 Jo. Kearny	h'4.			Trust Fund Contribution		to Fees
Zip	Country	Zip 3.	Countr	у		8. This corporation owes or has pai	id the current year in	ntangible
24	25		10			Personal Property Tax due June		□ No
	g. Name and Address of Current	Registered Agent		nr		10. Name and Address of New Re-	gistered Agent	
EPSTËIN, DONALD L				81 Name				
	00 25TH STREET BAY 5	82 Street Addr		Addres	s (P.O. Box Number is Not Acceptab	le)		
W	EST PALM BEACH FL 33407				•			
			83	4				
			84	City			FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutos	the show	e-named i	cornor	ation submite this statement for the n		ite registered
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 obligations of. Section 607.0505, Florida Statutes.								
SIGNATURE	Signature typod or printed name of registered agent	and file if applicable (NOTE)	Registered Ag	ent signature i	required:	when reinstating)	DATE	
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
TITLE	ST D	DELETE	1.1 TITLE		J.C	erigin - 1/26010)		Addition
NAME	EPSTEIN, DONALD		1.2 NAME		PA	MELA, EPSTON	/v	
STREET ADDRESS			1.3 STREE	1 ADDRESS	76	05 N.W. SI, Pla		_
CITY-\$1-ZIP	WEST PALM BEACH FL 33407		1.4 CITY -	ST-ZIP	<u></u>	ORAL SPRINGS	FL. 3306	7
TITLE	STD	☐ DELETE	2.1 TITLE		Ų	255551	☐ Change	Addition
NAME	KAPLAN, ELAINE		2.2 NAME		H,	507 A F 657 F 1 NO.	116	
STREET ADDRESS	164 EILEEN DRIVE		2.3 STREE	1 ADDRESS	40	MODD HONT OR	201	
CITY-ST-ZIP	CEDAR GROVE NJ 07008		2. 4 CITY-	ST-ZIP	<u>/}</u>	V8/0 C1. 06	0 9 1	
TITLE		L) DELETÉ	3.1 TITLE		Js	CT Valen	Change	Addition
NAME			3.2 NAME		1	orty Making	L Auc.	,
STREET ADDRESS			3.3 STREE	T ADDRESS	1	og Hackensac	4/ x70	4,
CITY-ST-ZIP			3.4. CITY-	ST-7IP		Jo, Hearny	11.1 0 10	3
TITLE		[] DELETE	4.1 TITLE			•	Change	Addition
NAME			4 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-\$T-ZIP			4.4 CITY-	ST-ZIP			*****	
TITLE		☐ DELETE	5.1 TITLE				☐ Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP		Deceme	5.4 CiTY - I	ST - ZIP			· · · · · · · · · · · · · · · · · · ·	
TITLE		L.) DELETE	6.1 TITLE				L Change	Addition
NAME			6.2 NAME	-				
STREET ADDRESS	•		6.3 STREE	I ADDRESS				
CITY-ST-ZIP	and the state of t	Alaia dilina ada a a a a a a a a a	6.4 CITY -		<u> </u>		tale - we start	.,
Indicated officer or	certify that the information supplied with on this annual report or supplemental a director of the corporation or the recent or Block 13 if changed, or on an attach	annual report is true and accur- for or trustee empowered to ex-	ate and th	al my sign	nature :	shall have the same legal effect as if	made under oath: th	at I am an