


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

APPROVED
AND
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97 MAY -1 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000089537					
1. Corporation Name Cobra Technologies, Inc.					
Principal Place of Business			Mailing Address		
5385 Paddington Drive Tallahassee, FL 32308					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 2851 Remington Green Circle		26 Suite, Apt. #, etc.		11/95	
22 Suite C		27 City & State		3a. Date of Last Report	
23 Tallahassee FL		28 City & State		4/96	
24 32308		29 Zip		4. FEI Number	
25 US		30 Country		59-3351864	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
Brian Rowe 5385 Paddington Drive Tallahassee, FL 32308				81 Name Brian Rowe	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83 Suite C	
				84 City	
				Tallahassee	
				FL	
				85 Zip Code	
				32308	
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: Brian Rowe (Signature) B. Rowe (Typed Name) 4-29-97 (Date)					
12. OFFICERS AND DIRECTORS					
1.1 TITLE President					
1.2 NAME Brian Rowe					
1.3 STREET ADDRESS 5385 Paddington Drive					
1.4 CITY - ST - ZIP Tallahassee, FL 32308					
2.1 TITLE Vice President					
2.2 NAME Wigel Ballister					
2.3 STREET ADDRESS 2015 Forest Glen Court					
2.4 CITY - ST - ZIP Tallahassee, FL 32308					
3.1 TITLE Vice President					
3.2 NAME Kevin O'Brien					
3.3 STREET ADDRESS 2773 Vincini Lane West					
3.4 CITY - ST - ZIP Palm Harbor, FL 34684					
4.1 TITLE Treasurer					
4.2 NAME Tom Sawyer					
4.3 STREET ADDRESS 5725 NE 16th Ave					
4.4 CITY - ST - ZIP Fort Lauderdale, FL 33334					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE 700002167537-13					
1.2 NAME -05/06/97--01075--003					
1.3 STREET ADDRESS ****165.00 ****165.00					
1.4 CITY - ST - ZIP					
2.1 TITLE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
3.1 TITLE					
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4.4 CITY - ST - ZIP					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY - ST - ZIP					
6.1 TITLE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY - ST - ZIP					
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 supplemental 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 on an attachment with an address.					
SIGNATURE: Brian Rowe (Signature) B. Rowe (Typed Name) 4-29-97 (Date) 904-553-9393 (Daytime Phone)					

CR2E034 (9/96)