

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000089537

Entity Name: COBRA TECHNOLOGIES, INC.

FILED
May 24, 2005
Secretary of State

Current Principal Place of Business:

2930 WELLINGTON CIRCLE
SUITE 201
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

2930 WELLINGTON CIRCLE
SUITE 201
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 59-3351864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWE, BRIAN
2930 WELLINGTON CIRCLE
SUITE 201
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROWE, BRIAN
Address: 5135 PIMLICO DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP () Delete
Name: PALLISTER, NIGEL
Address: 134 10TH STREET EAST
City-St-Zip: TIERRA VERDE, FL 33715

Title: VP () Delete
Name: O'BRIEN, KEVIN
Address: 721 CORAL REEF DR
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROWE, BRIAN
Address: 2930 WELLINGTON CIRCLE, SUITE 201
City-St-Zip: TALLAHASSEE, FL 32309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN ROWE

P

05/24/2005

Electronic Signature of Signing Officer or Director

Date