

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

**FILED**

**Jan 27 1997 8:00am  
Secretary of State**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P96000029746 (0)**

1. Corporation Name

**COCOA MANAGEMENT INC.**



Principal Place of Business

**C/O UNITED CORPORATE SERVICES, INC.  
801 N.E. 167TH ST., STE. 300  
NORTH MIAMI BEACH FL 33162**

Mailing Address

**C/O UNITED CORPORATE SERVICES, INC.  
801 N.E. 167TH ST., STE. 300  
NORTH MIAMI BEACH FL 33162-3729**

3. Date Incorporated or Qualified

**04/04/1996**

3a. Date of Last Report

2. Principal Place of Business

21. **992 East 15th Street**

Suite, Apt. #, etc.

22. **#200**

City & State

23. **Brooklyn, NY**

Zip

24. **11230**

Country

**Kings**

2a. Mailing Address

26. **992 East 15th Street**

Suite, Apt. #, etc.

27. **#200**

City & State

28. **Brooklyn, NY**

Zip

29. **11230**

Country

**Kings**

4. FEI Number

**11-3314957**

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES, INC.  
801 N.E. 167TH ST.  
SUITE 300  
NORTH MIAMI BEACH FL 33162**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

**FL**

85. Zip Code

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, typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE  
NAME **BARR, RAY A**  
STREET ADDRESS **10 BANK ST.**  
CITY-ST-ZIP **WEST PLAINS NY 10606**

TITLE **D** ☒ DELETE  
NAME **SKUBICKI, MARK**  
STREET ADDRESS **10 BANK ST.**  
CITY-ST-ZIP **WEST PLAINS NY 10606**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **President** ☒ Change ☐ Addition  
12 NAME **Tomas Rosenthal**  
13 STREET ADDRESS **992 East 15th Street, Suite 200**  
14 CITY-ST-ZIP **Brooklyn, NY 11230**

21 TITLE **Vice-President** ☒ Change ☐ Addition  
22 NAME **Henri Schmidt**  
23 STREET ADDRESS **992 East 15th Street, Suite 200**  
24 CITY-ST-ZIP **Brooklyn, NY 11230**

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/20/97**

**718-692-4181**

Date

Daytime Phone

CR2E034 (9/96)