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FILED
May 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000066519 (5)

1. Corporation Name

COOPERATIVE OBJECTS ON LINE, INC.



Principal Place of Business

13014 NORTH DALE MABRY HIGHWAY, UNIT 190
TAMPA FL 33618

Mailing Address

C/O RAHUL NARAIN
13014 NORTH DALE MABRY HWY. #190
TAMPA FL 33618

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/09/1996

4. FEI Number

59-3412479

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 6161 Memorial Hwy

Suite, Apt. #, etc.

22 #902

City & State

23 Tampa FL

Zip

24 33615-4545

Country

25 USA

2a. Mailing Address

26 6161 Memorial Hwy.

Suite, Apt. #, etc.

27 902

City & State

28 TAMPA - FL

Zip

29 33615-4545

Country

30 USA

9. Name and Address of Current Registered Agent

NARAIN, RAHUL A
310 E. FERN ST.
TAMPA FL 33604

10. Name and Address of New Registered Agent

81 Name

NARAIN, RAHUL A

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

6161 Memorial Highway, #902

83

84 City

TAMPA

FL

85 Zip Code

33615

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 Rahul A. Narain

Signature, typed or printed name of registered agent and title if applicable

(NOT: Registered Agent signature required when reappointing)

Jan 16th, 1998

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME PSTD
STREET ADDRESS NARAIN, RAHUL A
CITY-ST-ZIP 13014 NORTH DALE MABRY HIGHWAY, UNIT 190
TAMPA FL 33618

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME PSTD
1.3 STREET ADDRESS NARAIN, RAHUL A
1.4 CITY-ST-ZIP 6161 Memorial Highway, #902
TAMPA FL 33615-4545

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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 Rahul A. Narain

Jan 16th, 1998 812 232 2015

CR2E034 (10/97)