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 COMPORATIONS

DOCUMENT # P97000034777 (7)

KING COBRA SALES INC.

Principal Place of Business

Mailing Address

3496 W. ORANGE AVE. TALLAHASSEE FL 32310 P.O. BOX 5587 TALLAHASSEE FL 32314

FILED Mar 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

					04/17/1997			
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number .70	1-1000	Ar	plied For
21		26	26		End	planes2		t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional
22		27					Fee Re	quired
City & State	9	City & State			6. Election Campaign Financing	_	\$5.00	
23		28			Trust Fund Contribution		Added	
Zip	Country	Zip	Country		8. This corporation owes or has pa	_	_	. ~
24	25	29 Current Registered Agent	30		Personal Property Tax due June 10. Name and Address of New Re-) No
		Chitetir Hedistelan Maeur	81	Name	10. Name and Address of New He	Alatered Wor	orit	
RALEY, CAROL								
3496 W. ORANGE AVE. TALLAHASSEE FL 32310				82 Street Address (P.O. Box Number is Not Acceptable)				
				City		FL	5 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, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12.		ERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		RECTOR	S IN 12
TITLE			1.1 TITLE				Change	Addition
NAME	L.J. Roley		1.2 NAME	1			•	Ì
STREET ADDRESS	TANDRESS JUGA IN Drange Ave.		1.3 STREET	ADDRESS				
CITY-ST-ZIP			1.4 CITY-S					ļ
TITLE	owner,	DELETE	2,1 T(TLE	<u>' - </u>			Change	Addition
NAME	Sand Bridge		2.2 NAME			_		
STREET ADDRESS	EFT ANDRESS DYGL WY Drange AUC			ADDRESS				- 1
CITY-ST-ZIP	10 Plan 33-310			*******				
TITLE			2 4 CITY - S 3.1 TITLE	1-211			Change	Addition
NAME			3.2 NAME	(•	
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-S	1				}
TITLE			4.1 TITLE	1-811		П	Change	Addition
NAME			4. 2 NAME	1			onange	
STREET ADDRESS			4.3 STREET	Annress				
CITY-ST-ZIP			4.4 CITY-S	- 1				
TITLE		DELETE	5,1 TITLE	1-CH		——	Change	☐ Addition
NAME		Second Common (St	5.2 NAME	İ		_		
STREET ADDRESS			5.3 STREET	Anness				}
CITY-ST-ZIP			5.4 CITY - ST	1				ļ
TITLE		DELETE	6.1 TITLE	- TH.			Change	Addition
NAME			62 NAME	ĺ		-		
STREET ADDRESS			6.3 STREET	ANNOTES				j
ľ			1	1				1
14. I hereby c	ertify that the information sup	plied with this filing does not qualify to	6.4 CITY-ST		Section 119.07(3)(i), Florida Statutes. I	urther 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:

Ralen