

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000007999

Entity Name: THOMAS C. COBB P.A.

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

3841 NE 2ND AVENUE
SUITE 305
MIAMI, FL 331373699

New Principal Place of Business:

Current Mailing Address:

3841 NE 2ND AVENUE
SUITE 305
MIAMI, FL 331373699

New Mailing Address:

FEI Number: 65-0809038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBB, THOMAS C
3841 NW 2ND AVENUE
SUITE 305
MIAMI, FL 331378063 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PASD () Delete
Name: COBB, THOMAS C
Address: 825 BRICKELL BAY DRIVE, SUITE 1648
City-St-Zip: MIAMI, FL 33131

Title: VSTD (X) Delete
Name: EBIN, LINDA
Address: 825 BRICKELL BAY DRIVE, SUITE 1648
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: COBB, THOMAS C
Address: 3841 NE 2ND AVENUE, SUITE 305
City-St-Zip: MIAMI, FL 331378063

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: THOMAS C. COBB

PRES

01/07/2008

Electronic Signature of Signing Officer or Director

Date