PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

Katherice Harrisi
Secretary of State
DIVISION OF CORPORATIONS

1999

DOCUMENT # P98000087575

1. Corporation Name
KOBA CORPORATION

Mailing Address

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90030 032 ***150.00



Principal Pla	ace of Business	Mailing Address				\$				
3308 S.W. 10	DIST TERRACE	3308 S.W. 101ST TERR	ACE							
GAINESVILLE	FL 32607	Gainesville FL 32607				DO NOT WRITE IN THIS SPACE				
									1	
						3. Date incorporated or Qualifed			1	
						10/12/1998			┥	
Principal Place of Business Za. Mailing Address						4. FEI Number	-	Applied For	1	
21		26				593539586		Not Applicable	}	
	ot, #, etc.	Suite, Apt. #, etc.				- 5:- Certificate of Status Desired-		5 Additional	<u></u>	
22	_ ~	27				Fee Required				
City & Si	tate	City & State				6. Election Campaign Financing	\$5.0	O May Be	1	
23		28				Trust Fund Contribution Added to Fees				
Zip	Country		Zip Country			8. This corporation owes the current year Intangible				
24	25	Z9	¬			Personal Property Tax Yes No				
24	9. Name and Address of Current			Γ		10. Name and Address of New Registered]	
	s. (telle she sections of consist	Nog. S. C.		81	Name				Ì	
RUSHING, BOB A					·				1	
1	08 S.W. 101ST TERRACE			82 Street Addre		ess (P.O. Box Number Is Not Acceptable)			1	
	NINESVILLE FL 32607			83					ı	
}	AIRESVILLE PL 3200/			53					1	
				84	City		85 Z	p Code	1	
}				1 1	•	F <u>L</u>		<u> </u>	1	
11. Pursua	nt to the provisions of Sections 607.0502	and 607.1508, Florida St	atutes, the a	bove	-named corpo	eration submits this statement for the purpose of	changing	its registered	ı	
office o	r registered agent, or both, in the State of	Florida. Such change wa	e authorized Florida Stat	i by t	ne corporation	n's board of directors. I hereby accept the appoin	innéut sa	19012re.en	}	
1		, 1000 ti, 3800011 007.0000	, ,0,,,,,,						ļ	
SIGNATUR	Signature, typed or printed name of registered agent	and title if annicable. (A	OTE: Registered	Agent	signature required	when reinstating) DATE			۱ 🖘	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS IN 12	R2E034 (11/98)	
TITLE		DELETE	1,1 17	TLE.			Chang	e Addition	\ Ξ	
NAME	CEO	_	12 N	WE					Z	
\ .	Heide m Rushing				ADDRESS				l S	
STREET ADDRE	\$ 3308 SW 101 Terf	0(07				•			lä	
CITY-ST-ZIP	GAINESUITE, FL 3	2607 □ DELETE		TY-ST	-200		Chark	e Addition	(5	
TITLE	president,	CT DETE 15						,	Į	
NAME	BODA Rushing		22 N	WE	- 1				1	
STREET ADORE	\$ 22K85(3(01/C1/)	_	2.3 51	REET	ADDRESS			تمننيت		
CITY ST ZIP	GAMESONIE, Fl. 32	607	24C	TY-ST	T-23P				ļ —	
TIFLE	,	☐ DELETE	3.177	TLE	1		Chang	e 🗌 Addition	ĺ	
NAME	l		32 N	WE	į.				l	
STREET ADDRE	ss		3.3 8	REET.	ADORESS			,	1	
L	~~			TY-ST	i				l	
TITLE		DELETE		TLE .			Chang	e Addition	1	
1	1		4.2 N						1	
NAME	1								1	
STREET ADORE	SS				ADDRESS				l	
CITY-ST-ZIP				TY-ST	-ZIP		OC	e [] Addition	1	
TITLE	ļ	☐ DELETE			-		☐ Chang	e Cannon	1	
NAME			52 N						ĺ	
STREET ADORE	SS		5.3 \$1	REET	ADDRESS					
CITY-ST-ZIP		•	5.4 CI	TY-51	-ZIP				ĺ	
TITLE		☐ DELETE	8,1 TI	ÎLE			☐ Chang	e Addition	1	
NAME	}		62 N	ME					1	
1					ADORESS			,	1	
STREET ADDRE	:55			-		•			ĺ	
CITY-ST-ZIP			640	7Y-ST	·LF) (

14. Thereby 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, with all other like empowered.

SIGNATURE

Hide M: Rushings

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352-331-1605