

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90021 015 ***150.00

DOCUMENT # P98000094808

1. Corporation Name

KOBA OF TAMPA, INC.

Principal Place of Business

3636 OAK HAVEN DRIVE #102
PALM HARBOR FL 34684

Mailing Address

3636 OAK HAVEN DRIVE #102
PALM HARBOR FL 34684

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1998

2. Principal Place of Business

21 2402 S MacDill Ave

2a. Mailing Address

26 2402 S. MacDill Ave

4. FEI Number

59-3552696

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

City & State

City & State

6. Election Campaign Financing

\$5.00 May Be

Added to Fees

23 Tampa FL

28 Tampa FL

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes

No

24 33609

25 USA

29 33609

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANDREWS, JANA
2807 W BUSCH BLVD
SUITE 202
TAMPA FL 33618

81 Name

Keiko Kobayashi

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

3636 Oak Haven Drive #102

83

84 City

Palm Harbor

FL

85 Zip Code

34684

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

Keiko Kobayashi

(NOTE: Registered Agent signature required when reinstating)

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME KOBAYASHI, KEIKO

STREET ADDRESS 3636 OAK HAVEN DRIVE #102

CITY-ST-ZIP PALM HARBOR FL 34684

TITLE ☐ DELETE

NAME KOBAYASHI, TADASHI

STREET ADDRESS 3636 OAK HAVEN DRIVE #102

CITY-ST-ZIP PALM HARBOR FL 34684

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

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

~~MANNO, DELES~~
~~4609 S. MATANZAS AVE.~~
~~TAMPA, FL 33611~~

~~MANNO, CANDACE~~
~~4609 S. MATANZAS AVE.~~
~~TAMPA, FL 33611~~

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, with all other like empowered.

SIGNATURE:

Tadashi Kobayashi

TADASHI KOBAYASHI 2/8/99

727-785-083

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TADASHI KOBAYASHI 4/20/99