

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000020699

1. Entity Name

COBOSS, Incorporated

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90702 024 ***150.00

DO NOT WRITE IN THIS SPACE

763477

2. Principal Place of Business
2831 Ringling Blvd.

3. Mailing Address
2831 Ringling Blvd.

Suite, Apt. #, etc.
203-D

Suite, Apt. #, etc.
203-D

City & State
Sarasota, FL

City & State
Sarasota, FL

Zip
34237

Country
USA

Zip
34237

Country
USA

4. FEI Number
59-3702732

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
John R. Flanagan

Street Address (P.O. Box Number is Not Acceptable)
2831 Ringling Blvd.

Suite 203-D

City
Sarasota

FL

Zip Code
34237

8. 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 **John R. Flanagan**

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

(NOTE: Registered Agent Signature required when reinstating)

4/3/02

DATE

9. This Corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Director / President
Jerry Cybalski
1102 Victoria Street, Suite 201
Kitchner, Ontario N2B3T2**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Secretary
John R. Flanagan
2831 Ringling Blvd, Suite 203-D
Sarasota, FL 34237**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **John R. Flanagan Secretary**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/02

Date

(941) 366-5646

Daytime Phone #