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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 14 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S46666

(1)

COBRA CONSTRUCTION AND COMPANY, INC.

Principal Place	R RD.	Mailing Address 1511 BROOKER RD.				
BRANDON FL 33511 US		BRANDON FL 33511-7629 US	•			
•		-			 Date Incorporated or Qualified 04/19/1991 	3a. Date of Last Report 05/01/1996
· ·	ace of Business	2a. Mailing Address			4. FEI Number 65-0293385	Applied For
Suite Apt.	# ste	Suite Ant # etc	Suite, Apt. #, etc.		0570293303	Not Applicable \$8.75 Additional
22	n, oto	 	27		5. Certificate of Status Desired	Fee Required
City & State	<u></u>	City & State			6. Election Campaign Financing	\$5.00 May Be
		28			Trust Fund Contribution	Added to Fees
Ζιρ 24]	Country 25	Zip 29	Count	ry	8. This corporation has liability for Florida Statutes	intengible tax under s. 199.032, Yes
	9. Name and Address of Curre	nt Registered Agent		.,	10. Name and Address of New Re	glatered Agent
	IAR, JOHN F.		B	1 Name		
1511 BROOKER RD			8	2 Street Add	fress (P.O. Box Number is Not Acceptat	ole)
BKA	NDON FL 33511		8	3		
			_			
			8	4 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the abo	ve-named cor	poration submits this statement for the pation's board of directors. I hereby acce	purpose of changing its registered
agent Lar	ni familiar with, and accept the obli	gations of Section 607.0505, F	lorida Statut	es.	allors board of directors, I hereby acce	ot the appointment as registered
SIGNATURE		4/5	YC D			DATE
12.	Signature, typical or printed name of registered a OFFICERS Al	ND DIRECTORS	13.	Daux siGuatura redo	irad when reinstating) ADDITIONS/CHANGES TO OFFIC	
Turill	DP	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	HUJAR, DENNIS J.		1.2 NAM	E]		
STREET ADDRESS	1511 BROOKER RD.		1.3 STRE	et address		
CITY - S1 - ZIP	BRANDON FL	□ DELCTE	1.4 CITY	·····		Change Addition
TITLE		☐ DELETE	2.1 T/TLE 2.2 NAMI			- [Cuside [Noneon
NAME STREET ADDRESS				ET ADDRESS		
CITY-ST-Z#			2 4 CITY	1		
TITLE		DELETE	31 TITLE			Change Addition
NAME			3.2 NAMI			·
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CHY+ST-ZIP		Distr	3.4. CITY			Change [] Addition
TITUE		DELETE	4.1 TITLE 4.2 NAM			Change Addition
NAME STREET ADDRESS				ET ADDRESS		
City - SF-ZIP			4.4 CITY			į
THEE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRE	ET ADORESS		
CITY-ST-Z#			5.4 CITY			
1-TLF		DELETE	6 t TITLE	1		☐ Change ☐ Addition
NAME			62 NAM			
STREET ADORESS			63 STAE	ET ADDRESS		

14. I do 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

SIGNATURE:

appears in Block 12 or Block

ennis Dennis J. Hujar 4/7/97 813-691-105