FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 14, 2002 8:00 am Secretary of State S46666 **DOCUMENT #** 1. Entity Name 05-14-2002 90201 030 ***150.00 COBRA CONSTRUCTION AND COMPANY, INC. Mailing Address Principal Place of Business 1511 BROOKER RD. 1511 BROOKER RD. BRANDON FL 33511 BRANDON FL 33511 US 2. Principal Place of Business 2605 Brucken DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0293385 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUJAR, JOHN F. Street Address (P.O. Box Number is Not Acceptable) 1511 BROOKER RD **BRANDON FL 33511** Zio Code City 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. DΡ ☐ Delete TITLE TITLE NAME HUJAR, DENNIS J. NAME STREET ADDRESS STREET ADDRESS 1511 BROOKER RD. CITY-ST-ZIP **BRANDON FL** CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP* CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 Block 12 if changed, or on an attackment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

SIGNATURE AND PPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3-26-01 9/3-68/-/054