

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002112

Entity Name: XYBASE, INC.

FILED
Jan 05, 2009
Secretary of State

Current Principal Place of Business:

8 FANEUIL HALL
3RD FLOOR SUITE 404
BOSTON, MA 02109 US

New Principal Place of Business:

Current Mailing Address:

8 FANEUIL HALL
3RD FLOOR SUITE 404
BOSTON, MA 02109 US

New Mailing Address:

FEI Number: 65-0999581

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: TEO, SOKHIANG
Address: 8 FANEUIL HALL 3RD FLOOR SUITE 404
City-St-Zip: BOSTON, MA 02109 US

Title: DP () Delete
Name: ABU HASSAN, SUHAIMEE
Address: 8 FANEUIL HALL 3RD FLOOR SUITE 404
City-St-Zip: BOSTON, MA 02109 US

Title: DV () Delete
Name: ABU HASSAN, JAMIL S
Address: 8 FANEUIL HALL 3RD FLOOR SUITE 404
City-St-Zip: BOSTON, MA 02109 US

Title: DV () Delete
Name: MD SAID, MOHAMED IZMI
Address: 8 FANEUIL HALL 3RD FLOOR SUITE 404
City-St-Zip: BOSTON, MA 02109 US

Title: AS () Delete
Name: RISTAINO, DAVID C
Address: 350 EAST LAS OLAS BLVD., SUITE 1600
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP (X) Change () Addition
Name: ABU HASSAN SHAARI, SUHAIMEE
Address: 8 FANEUIL HALL 3RD FLOOR SUITE 404
City-St-Zip: BOSTON, MA 02109 US

Title: DV (X) Change () Addition
Name: ABU HASSAN SHAARI, JAMIL
Address: 8 FANEUIL HALL 3RD FLOOR SUITE 404
City-St-Zip: BOSTON, MA 02109 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SOKHIANG TEO

O

01/05/2009

Electronic Signature of Signing Officer or Director

Date