

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000251

FILED
Mar 04, 2004
Secretary of State**Entity Name:** SABER INC**Current Principal Place of Business:**3990 W FLAGLER #500
MIAMI, FL 33134**New Principal Place of Business:**3990 W FLAGLER ST
SUITE 500
MIAMI, FL 33134**Current Mailing Address:**3990 W FLAGLER #500
MIAMI, FL 33134**New Mailing Address:**3990 W FLAGLER ST
SUITE 500
MIAMI, FL 33134**FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**HABIF, JOSEFINA
3990 W FLAGLER #500
MIAMI, FL 33134**Name and Address of New Registered Agent:**HABIF, JOSEFINA
3990 W FLAGLER ST
SUITE 500
MIAMI, FL 33134

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: _____

03/04/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: HABIF, JOSEFINA
Address: 3990 W FLAGLER #500
City-St-Zip: MIAMI, FL 33134Title: D () Delete
Name: OBESO, FERNANDO
Address: 3990 W FLAGLER #500
City-St-Zip: MIAMI, FL 33134Title: D () Delete
Name: PALACIOS, MARIA C
Address: 3990 W FLAGLER #500
City-St-Zip: MIAMI, FL 33134**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: HABIF, JOSEFINA
Address: 3990 W FLAGLER ST, SUITE 500
City-St-Zip: MIAMI, FL 33134Title: D (X) Change () Addition
Name: OBESO, FERNANDO
Address: 3990 W FLAGLER ST, SUITE 500
City-St-Zip: MIAMI, FL 33134Title: D (X) Change () Addition
Name: PALACIOS, MARIA C
Address: 3990 W FLAGLER ST, SUITE 500
City-St-Zip: MIAMI, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEFINA HABIF

D

03/04/2004

Electronic Signature of Signing Officer or Director

Date