## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000009891

1231 CAPRI ST.

CORAL GABLES, FL 33134

Address:

City-St-Zip:

Entity Name: SABER INC.

FILED Mar 17, 2009 Secretary of State

| Current F                                   | Principal Place of Business:  | New Principal Place of Business:            |   |
|---|---|---|---|
| 3990 W. F<br>MIAMI, FL                      | FLAGLER ST., SUITE 103<br>. 33134   |   |   |
| Current N                                   | Nailing Address:  | New Mailing Address:                        |   |
| 3990 W. F<br>MIAMI, FL                      | FLAGLER ST., SUITE 103<br>. 33134   |   |   |
| FEI Number                                  | r: FEI Number Applied For (X)   | FEI Number Not Applicable ( )               | Certificate of Status Desired (X)       |
| Name and                                    | d Address of Current Registered Agent:  | Name and Address                            | of New Registered Agent:                |
| 3990 W. F                                   | FERNANDO<br>FLAGLER ST., SUITE 103<br>. 33134 US                                      |   |   |
|   | e named entity submits this statement for the e of Florida.                           | purpose of changing its registere           | ed office or registered agent, or both, |
| SIGNATU                                     |   |   |   |
|   | Electronic Signature of Registered Ag   | gent  | Date                                    |
| Election Ca                                 | ımpaign Financing Trust Fund Contribution ( ).  |   |   |
| OFFICERS AND DIRECTORS:                     |   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  |   |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | PD () Delete<br>OBESO, FERNANDO<br>2561 SW 92ND PL.<br>MIAMI, FL 33165                | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                   |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | VSD () Delete<br>MANRESA, MIGUEL<br>3990 W. FLAGLER ST., SUITE 103<br>MIAMI, FL 33134 | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                   |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | VD () Delete<br>HABIF, JOSEFINA<br>685 ALLDNDALE RD.<br>KEY BISCAYNE, FL 33149        | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                 |
| Title:<br>Name:                             | VD ( ) Delete<br>PALACIOS. MARIA CRISTINA   | Title:<br>Name:                             | () Change () Addition                   |

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.

Address:

City-St-Zip:

SIGNATURE: FERNANDO OBESO PD 03/17/2009