

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000030699

**FILED
Apr 15, 2005
Secretary of State**

Entity Name: HOBE DEVELOPMENT CO.

Current Principal Place of Business:

100 S BISKCAYNE BLVD
SUITE 1100
MIAMI, FL 33131

New Principal Place of Business:

100 S BISCAYNE BLVD
SUITE 1100
MIAMI, FL 33131

Current Mailing Address:

100 S BISKCAYNE BLVD
SUITE 1100
MIAMI, FL 33131

New Mailing Address:

100 S BISCAYNE BLVD
SUITE 1100
MIAMI, FL 33131

FEI Number: 65-0614564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOLLO, WAYNE
100 S BISKCAYNE BLVD
SUITE 1100
MIAMI, FL 33131 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: PSTD () Delete
Name: HOLLO, TIBOR
Address: 100 S BISKCAYNE BLVD SUITE 1100
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: HOLLO, JEROME
Address: 100 S. BISCAYNE BLVD., #1100
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP () Change (X) Addition
Name: HOLLO, WAYNE
Address: 100 S BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33131

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE HOLLO

VP

04/15/2005

Electronic Signature of Signing Officer or Director

_____ Date