## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000004184

Entity Name: SOBY MANAGEMENT SERVICES INC.

FILED Feb 09, 2005 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business    |
|--------------------------------------|------------------------------------|
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1790 W 49 STREET 305-8 HIALEAH, FL 33012

Current Mailing Address: New Mailing Address:

15604 NW 37TH AVENUE
OPA LOCKA, FL 33054

15604 NW 37TH AVENUE
MIAMI GARDENS, FL 33054

FEI Number: 65-1110854 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OROZCO, SALVADOR C
15604 NW 37TH AVENUE
OPA LOCKA, FL 33054 US
OROZCO, SALVADOR C
15604 NW 37TH AVENUE
MIAMI GARDENS, FL 33054 US

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: 02/09/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

( ) Delete

( ) Delete

OROZCO, SALVADOR

OPA LOCKA, FL 33054

OROZCO, BLANCA

15604 NW 37TH AVENUE

15604 NW 37TH AVENUE

OPA LOCKA, FL 33054

SANTAMARIA, YANETT

OPA LOCKA, FL 33054

15604 NW 37TH AVENUE

## **OFFICERS AND DIRECTORS:**

VΡ

Title:

Title:

Title:

Name:

Address: City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OROZCO, SALVADOR
Address: 15604 NW 37TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33054

Title: VP (X) Change ( ) Addition

Name: OROZCO, BLANCA
Address: 15604 NW 37TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33054

 Name:
 SANTAMARIA, JANETT

 Address:
 3276 W 70 STREET # 101

 City-St-Zip:
 HIALEAH, FL 33018

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: SALVADOR C. OROZCO P 02/09/2005