

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 610472

Entity Name: SOBEK, INC.

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

1941 NE 49TH AVE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

PO BOX 1043
OCALA, FL 344781043 US

New Mailing Address:

FEI Number: 59-2055913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DILL, BILLY W
1941 NE 49TH AVE
OCALA, FL US

Name and Address of New Registered Agent:

DILL, BILLY W
1941 NE 49TH AVE
OCALA, FL 34470 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:

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DILL, BILLY W,
Address: 1941 NE 49TH AVE
City-St-Zip: OCALA, FL

Title: VSTD () Delete
Name: DILL, JANICE OLDS,
Address: 1941 NE 49TH AVE.
City-St-Zip: OCALA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DILL, BILLY W,
Address: 1941 NE 49TH AVE
City-St-Zip: OCALA, FL 34470 US

Title: VSTD (X) Change () Addition
Name: DILL, JANICE OLDS,
Address: 1941 NE 49TH AVE.
City-St-Zip: OCALA, FL 34470 US

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: JANICE OLDS DILL

VSTD

04/24/2008

Electronic Signature of Signing Officer or Director

Date