2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002112

Entity Name: XYBASE, INC.

FILED Jan 09, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:		
	R SUITE 404	IS			
Current Mailing Address:			New Mailing Address:		
8 FANEUIL 3RD FLOO BOSTON,	R SUITE 404	IS			
FEI Number:	65-0999581	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desir	ed ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	ATION SERVICE	E COMPANY			
1201 HAYS	SSEE, FL 3230 [.]	I US			
The above in the State	named entity รเ e of Florida.	ubmits this statement for the pur	rpose of changing it	its registered office or registered agent	, or both,
SIGNATUR	RE:				
	Electronic	Signature of Registered Agen	t	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	TEO, SOK HIANG	3RD FLOOR SUITE 404	Title: Name: Address: City-St-Zip:	O (X) Change () Addition TEO, SOKHIANG 8 FANEUIL HALL 3RD FLOOR SUITE 404 BOSTON, MA 02109	
Title: Name: Address: City-St-Zip:	SHAARI, SUHAIM	3RD FLOOR SUITE 404	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition ABU HASSAN, SUHAIMEE 8 FANEUIL HALL 3RD FLOOR SUITE 404 BOSTON, MA 02109	
Title: Name: Address: City-St-Zip:	SHAARI, MOHD	Delete JAMIL A, BU HASSAN 3RD FLOOR SUITE 404 1109	Title: Name: Address: City-St-Zip:	DV (X) Change () Addition ABU HASSAN, JAMIL S 8 FANEUIL HALL 3RD FLOOR SUITE 404 BOSTON, MA 02109	
Title: Name: Address: City-St-Zip:	SAID, MOHAMÉE	3RD FLOOR SUITE 404	Title: Name: Address: City-St-Zip:	DV (X) Change () Addition MD SAID, MOHAMED IZMI 8 FANEUIL HALL 3RD FLOOR SUITE 404 BOSTON, MA 02109	
Title: Name: Address: City-St-Zip:	RISTAINO, DAVII	3RD FLOOR SUITE 404	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: SOKHIANG TEO MS 01/09/2006