## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000005852

Entity Name: CABAN SYSTEMS INC.

FILED Apr 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9390 MARINO CIRCLE #301 4601 66TH ST. W. #919B NAPELS, FL 34114 BRADENTON, FL 34210

Current Mailing Address: New Mailing Address:

4001 SANTA BARBARA BLVD. #329 5726 CORTEZ RD. W. NAPLES, FL 34104 #340 #340

BRADENTON, FL 34210

FEI Number: 72-1526420 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:

CABAN, ARON
9390 MARINO CIRCLE #301
NAPELS, FL 34114

CABAN, ARON
4601 66TH ST. W. #919B
BRADENTON, FL 34210

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: 04/26/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: CPST ( ) Delete

Name: CABAN, ARON

Address: 4001 SANTA BARBARA BLVD. #329

City-St-Zip: NAPELS, FL 34104

Title: DV () Delete Name: CABAN, ARON

Name: CABAN, ARON

Address: 4001 SANTA BARBARA BLVD. #329

City-St-Zip: NAPELS, FL 34104

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change ( ) Addition

Name: CABAN, ARON

Address: 5726 CORTEZ RD. W. #340 City-St-Zip: BRADENTON, FL 34210

Title: DV (X) Change () Addition

Name: CABAN, ARON

Address: 5726 CORTEZ RD. W. #340 City-St-Zip: BRADENTON, FL 34210

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: ARON CABAN DIR 04/26/2004