## F05000000874

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## **COVER LETTER**

Division of Corporations
SUBJECT: EDBI LIMITED INC. (Name of Corporation)
DOCUMENT NUMBER: +05 0000 00874
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mayasari Lim
(Name of Contact Person)
EOBI Limited Inc.
(Firm/Company)
3834 SW 67th Terr.
(Address)
Miramar, FL 33023
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (454) 9890260 (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, statement of change is submitted for a corporation organized under the laws of the	
in order to change its registered office or registered agent, or both, in th	
1. The name of the corporation: EOBI Limited mc.	
1. The name of the corporation: FOBI Limited Inc.  2. The principal office address: 3834 SW 6744 Ten. Miram	ur, FL 33023
3. The mailing address (if different):	
4. Date of incorporation/qualification:	F05000000874
5. The name and street address of the current registered agent and registered office Florida Department of State:	
Mayasari Lm	ن د مسرد
3834 SW 674 Terr.	
3834 SW 67th Terr. Whanhar, FL33023	OS O
6. The name and street address of the <u>new registered agent</u> (if changed) and /or registered agent (if changed):	gistered office RY OF SI
3833 SN 67th Terr.  (P.O. Box NOT acceptable)  Miramar, FL 33023	DRATE A
The street address of its registered office and the street address of the business as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directo authorized by the board, or the corporation has been notified in writing of the	rs or by an officer so change.
(Signature of an efficer of director)  Mayasavi (Printed or ty	Lim Seuretary
I hereby accept the appointment as registered agent and agree to act in this ca I further agree to comply with the provisions of all statutes relative to the prop of my duties, and I am familiar with and accept the obligation of my position a document is being filed merely to reflect a change in the registered office addr corporation has been notified in writing of this change.	pacity, ver and complete performance is registered agent. Or, if this ess, I hereby confirm that the
(Signature of Registered Agent) (I	Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)