2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007316

Entity Name: TARABU, INC.

FILED Feb 13, 2009 Secretary of State

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

6355 NW 36TH STREET, 2ND FLOOR MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

6355 NW 36TH STREET, 2ND FLOOR 999 PONCE DE LEON BLVD SUITE

MIAMI, FL 33166

CORAL GABLES, FL 33134

FEI Number: 71-1016083 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:

SPENCER, THOMAS R SPENCER, THOMAS R SEC 999 PONCE DE LEON BLVD 999 PONCE DE LEON BLVD 510

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: THOMAS R SPENCER 02/13/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition Name: FOLCH, SALVI Name: FOLCH, SALVI

6355 NW 36TH STREET, 2ND FLOOR 6355 NW 36TH STREET, 2ND FLOOR Address: Address:

City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166

DV Title: Title: () Delete () Change () Addition

Name: RALLO, ANTONIO Name: 6355 NW 36TH STREET, 2ND FLOOR Address: Address: MIAMI, FL 33166 City-St-Zip: City-St-Zip:

() Delete Title: () Change () Addition Title: DP

GARCIA, JOSE ANTONIO Name: Name: 6355 NW 36TH STREET, 2ND FLOOR Address Address:

City-St-Zip: MIAMI, FL 33166 City-St-Zip:

Title: () Delete Title: (X) Change () Addition SPENCER, THOMAS R BALCARCEL, JOAQUIN Name: Name:

Address: 999 PONCE DE LEON BLVD SUITE SUITE 510 Address: 6355 NW 36TH STREET, 2ND FLOOR

City-St-Zip: MIAMI, FL 33134 City-St-Zip: MIAMI, FL 33166

Title: Title: () Delete () Change () Addition

LUTTEROTH, JORGE Name: Name: 6355 NW 36TH STREET, 2ND FLOOR Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip:

Title: () Delete Title: () Change () Addition

SALVIDAR, JUAN Name: Name: 6355 NW 36TH STREET, 2ND FLOOR Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip:

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: THOMAS R SPENCER, SEC SRA 02/13/2009