2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2009
Secretary of State

DOCUMENT# G81236

Entity Name: OBIARTS, INC.

Current Principal Place of Business:

3599 UNIVERSITY BLVD S
SUITE 604
JACKSONVILLE, FL 32216

New Principal Place of Business:

3599 UNIVERSITY BLVD SOUTH
SUITE 604
JACKSONVILLE, FL 32216

Current Mailing Address:

3599 UNIVERSITY BLVD S
SUITE 604
JACKSONVILLE, FL 32216

New Mailing Address:

3599 UNIVERSITY BLVD SOUTH
SUITE 604
JACKSONVILLE, FL 32216

FEI Number: 59-1350854 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUDWIG AND BURN PA
5150 BELFORT ROAD STE 500
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

LUDWIG AND BURN PA
5150 BELFORT ROAD
SUITE 500
JACKSONVILLE, FL 32256 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: _____ 02/28/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: OBI, LEWIS J.,
Address: 3599 UNIVERSITY BLVD S.
City-St-Zip: JACKSONVILLE, FL

Title: V ( ) Delete
Name: BAIRSTOW-OBI, MYRA,
Address: 3599 UNIVERSITY BLVD. S.
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition
Name: OBI, LEWIS J DR
Address: 3599 UNIVERSITY BLVD SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

Title: V (X) Change ( ) Addition
Name: BAIRSTOW-OBI, MYRA
Address: 3599 UNIVERSITY BLVD. SOUTH
City-St-Zip: JACKSONVILLE, FL 32216

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: BAIRSTOW-OBI, MYRA V 02/28/2009
Electronic Signature of Signing Officer or Director — Date