2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K97113

Address:

City-St-Zip:

PANAMA CITY, FL 32405

Entity Name: RANOBI CORPORATION

FILED Feb 06, 2008 Secretary of State

Current D	rinainal Place	of Business	New Principal Place of Business:				
2350 JENH	rincipal Place KS AVE. CITY, FL 32409		New Princ	ipai Piace c	or Business:		
Current Mailing Address:			New Maili	New Mailing Address:			
2350 JENI PANAMA (KS AVE. CITY, FL 3240(5					
FEI Number	: 59-2955841	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Des	ired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent	t:	
	RALPH M / HAMPSHIRE /EN, FL 32444	US					
	named entity see of Florida.	ubmits this statement for the p	ourpose of changing i	ts registered	l office or registered ager	nt, or both,	
SIGNATU	RE:						
	Electron	ic Signature of Registered Age	ent		Date		
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICER	S AND DIREC	rors:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () VOGLER, RALP 1106 NEW HAW LYNN HAVEN, F	PSHIRE AVE	Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address: City-St-Zip:	VSTD () BROWN, WILLI 1104 FAIRLAND BRADENTON, F	AVE	Title: Name: Address: City-St-Zip:	VSTD BROWN, WII 1104 FAIRLA PANAMA CIT	ND AVE		
Title: Name: Address: City-St-Zip:	S () VOGLER, LISA 1106 NEW HAW LYNN HAVEN, F	PSHIRE AVE	Title: Name: Address: City-St-Zip:	,	() Change () Addition		
Title: Name: Address:	T () VOGLER, LINDA 1810 BROWN A		Title: Name: Address:	,	()Change ()Addition		

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.

Address:

City-St-Zip:

SIGNATURE: LISA VOGLER 02/06/2008 S