2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000060038

Entity Name: OBABLU, LLC

FILED Apr 29, 2009 Secretary of State

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

1114 CENTRAL AVENUE 2429 CENTRAL AVENUE ST. PETERSBURG, FL 33705 ST. PETERSBURG, FL 33713

Current Mailing Address: New Mailing Address:

1114 CENTRAL AVENUE 2429 CENTRAL AVENUE ST. PETERSBURG, FL 33705 ST. PETERSBURG, FL 33713

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JENNINGS, CLAUDIA S
1114 CENTRAL AVENUE
ST. PETERSBURG, FL 33705 US
JENNINGS, CLAUDIA S
2429 CENTRAL AVENUE
ST. PETERSBURG, FL 33713 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: CLAUDIA S JENNINGS 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition JENNINGS, CLAUDIA S JENNINGS, CLAUDIA S Name: Name: Address: 1114 CENTRAL AVENUE Address: 2429CENTRAL AVENUE City-St-Zip: ST. PETERSBURG, FL 33705 City-St-Zip: ST. PETERSBURG, FL 33713

 Title:
 () Delete
 Title:
 MGR () Change (X) Addition

 Name:
 Name:
 JENNINGS, PATRICK M

 Address:
 Address:
 2429 CENTRAL AVENUE

 City-St-Zip:
 City-St-Zip:
 ST. PETERSBURG, FL 33713

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PATRICK M. JENNINGS MGR 04/29/2009