2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L36738

Entity Name: JOBA, INC.

FILED Apr 25, 2005 Secretary of State

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

440 S. FEDERAL HIGHWAY #206 440 S. FEDERAL HIGHWAY #107

P.O. BOX 1053 P.O. BOX 1053

DEERFIELD BEACH, FL 334438053 DEERFIELD BEACH, FL 334438053

Current Mailing Address: New Mailing Address:

440 S. FEDERAL HIGHWAY #206 440 S. FEDERAL HIGHWAY

P.O. BOX 1053 P.O. BOX 1053

DEERFIELD BEACH, FL 334431053 DEERFIELD BEACH, FL 334431053

FEI Number: 65-0167816 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:

PINCISS, BARRY P MR.
440 S. FEDERAL HWY.
PINCISS, BARRY P MR.
440 S. FEDERAL HWY.

STE #206 STE #107

DEERFIELD BEACH, FL 33441 US DEERFIELD BEACH, FL 33441 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: PINCISS BARRY P 04/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PINCISS, BARRY,
 Name:

 Address:
 440 S. FEDERAL HWY, STE # 206
 Address:

 City-St-Zip:
 DEERFIELD BEACH, FL 33441
 City-St-Zip:

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

 Name:
 WARSHAVER, JOANNE,
 Name:

 Address:
 440 S. FEDERAL HWY., STE #206
 Address:

 City-St-Zip:
 DEERFIELD BEACH, FL 33441
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PINCISS BARRY DP 04/25/2005