2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006
Secretary of State

DOCUMENT# N50056

Entity Name: OBADIAH INC.

Current Principal Place of Business:

901 N.W. 62ND ST.
MIAMI, FL 33150

New Principal Place of Business:

Current Mailing Address:

2200 N.W. 191ST
MIAMI, FL 33056

New Mailing Address:

FEI Number: 65-0352965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMPSON, APRYL
1488 NW 44 STREET
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SIMS-LIGHTBOURN, MICHEALANE
Address: 2200 NW 191 STREET
City-St-Zip: OPA LOCKA, FL 33056

Title: VD ( ) Delete
Name: THOMPSON, APRYL
Address: 1481 NW 44 STREET
City-St-Zip: MIAMI, FL 33142

Title: S ( ) Delete
Name: TILLMAN, DEREK
Address: 1481 NW 44 STREET
City-St-Zip: MIAMI, FL 33142

Title: D ( ) Delete
Name: THOMPSON, RUEBEN,
Address: 1273 NE 92 ST
City-St-Zip: MIAMI, FL

Title: D ( ) Delete
Name: DANIELS, CAROLYN
Address: 901 N 62 STREET
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHEALANE SIMS-LIGHTBOURN PD 04/07/2006

Electronic Signature of Signing Officer or Director — Date