

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000080649

Entity Name: FOBA SUPPLIES, INC.

FILED  
Mar 17, 2005  
Secretary of State

## Current Principal Place of Business:

4119 NW 2ND AVE  
MIAMI, FL 33127

## New Principal Place of Business:

678 SE PARK DRIVE  
2  
HIALEAH, FL 33010

## Current Mailing Address:

4119 NW 2ND AVE  
MIAMI, FL 33127

## New Mailing Address:

678 SE PARK DRIVE  
2  
HIALEAH, FL 33010

FEI Number: 65-1035031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARDOSO, LESTER  
4119 NW 2ND AVE  
MIAMI, FL 33127 US

## Name and Address of New Registered Agent:

CARDOSO, LESTER M  
678 SE PARK DRIVE  
2  
HIALEAH, FL 33010 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: LESTER CARDOSO

03/17/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CARDOSO, LESTER  
Address: 4119 NW 2ND AVE  
City-St-Zip: MIAMI, FL 33127

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CARDOSO, LESTER M  
Address: 678 SE PARK DRIVE #2  
City-St-Zip: HIALEAH, FL 33010 US

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: LESTER CARDOSO

P

03/17/2005

Electronic Signature of Signing Officer or Director

Date