

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050390

Entity Name: CABA, INC.

FILED  
May 09, 2007  
Secretary of State

## Current Principal Place of Business:

7220 N.W. 36 STREET #637  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

7220 N.W. 36 STREET #637  
MIAMI, FL 33166

## New Mailing Address:

FEI Number: 65-1101493

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARRIOS, JAIME A  
7220 N.W. 36 STREET #637  
MIAMI, FL 33166 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BARRIOS, CLARA I  
Address: 7220 N.W. 36 STREET #637  
City-St-Zip: MIAMI, FL 33166

Title: TD ( ) Delete  
Name: CABRERA, DYDIER  
Address: 2780 NE 183 STREET #1117  
City-St-Zip: AVENTURA, FL 33160

Title: SD ( ) Delete  
Name: BARRIOS, JAIME A  
Address: 2780 NE 183 STREET #1117  
City-St-Zip: AVENTURA, FL 33160

Title: VPD ( ) Delete  
Name: CABRERA, DIANA C  
Address: 2780 NE 183 STREET #1117  
City-St-Zip: AVENTURA, FL 33160

## 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:

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.

SIGNATURE: CLARA INES BARRIOS

PD

05/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date