2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000075302

Entity Name: SOBANI INC.

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business: 11142 N 30 STREET #207 TAMPA, FL 33612 Current Mailing Address:			New Principal Place of	New Principal Place of Business: 8060 W. WATERS AVENUE TAMPA, FL 33615 New Mailing Address:	
			New Mailing Address:		
P.O. BOX RIVERVIE	1190 W, FL 33568		8060 W. WATERS AVE. TAMPA, FL 33615		
FEI Number	: 59-3751964	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address of I	New Registered Agent:	
ABUIMAISH, GUS P.O. BOX 1190 RIVERVIEW, FL 33568			ABUAMAISH, MAJED 8060 W. WATERS AVE. TAMPA, FL 33615	8060 W. WATERS AVE.	
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered of	office or registered agent, or both,	
SIGNATURE: M. ABUAMAISH				04/29/2003	
	Electror	nic Signature of Registered Ag	gent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	TREA (ABUAMAISH, N P.O. BOX 372 RIVERVIEW, F		Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	•		Title: (Name: Address: City-St-Zip:) Change ()Addition	
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Title: Name: Address: City-St-Zip:	V.P ()) Delete IAJED A V. PRES L 33568	Title: (Name: Address: City-St-Zip:) Change()Addition	

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.

City-St-Zip:

SIGNATURE: M.ABUAMAISH VP 04/29/2003

RIVERVIEW, FL 33568

City-St-Zip: