

FILED
Apr 23, 2004 8:00 am
Secretary of State

54039082

DOCUMENT # P01000077114

1. Entity Name
OMBU, INC.



Principal Place of Business
2301 COLLINS AVENUE
A503
MIAMI BEACH, FL 33140

Mailing Address
7328 SW 48 STREET
MIAMI, FL 33155

2. Principal Place of Business
14540 SW 148 AVE
Suite, Apt. #, etc.
MIAMI
City & State
FL ORION
Zip
33196
Country
JAB

3. Mailing Address
Suite, Apt. #, etc.
City & State
City
Country

6. Name and Address of Current Registered Agent
VEJAS, JOSE L
2301 COLLINS AVENUE
A503
MIAMI BEACH, FL 33140

7. Name and Address of New Registered Agent
Name
CARLOS A. FITRIC
Street Address (P.O. Box Number is Not Acceptable)
14540 SW 148 AVE
MIAMI FL
City
FL
Zip Code
33196

8. 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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE: [Signature] CARLOS A. FITRIC
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS
TITLE PD
NAME VEJAS, JOSE L
STREET ADDRESS 2301 COLLINS AVENUE
CITY-ST-ZIP MIAMI BEACH, FL 33140
[Delete]
[Delete]
[Delete]
[Delete]
[Delete]
[Delete]


11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE P/D
NAME CARLOS A. FITRIC
STREET ADDRESS 14540 SW 148 AVE
CITY-ST-ZIP MIAMI FL 33196
[Change] [Addition]
[Change] [Addition]
[Change] [Addition]
[Change] [Addition]
[Change] [Addition]
[Change] [Addition]

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] CARLOS A. FITRIC 4/20/04 305 479 8537
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

04-23-2004 90207 019 ***150.00

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04072004 Chg-P CR2E034 (10/03)

4. FEI Number
65-0322284
Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required