


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2006 8:00 am
Secretary of State

02-23-2006 90007 023 ***150.00

DOCUMENT # P03000017667	
1. Entity Name SABO INTERNATIONAL, INC.	

Principal Place of Business 1411 SW 7TH AVE OKEECHOBEE, FL 34974	Mailing Address 1411 SW 7TH AVE OKEECHOBEE, FL 34974
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2. Principal Place of Business 312 SW 7TH AVE	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Okeechobee FL	City & State
Zip 34974	Country



01162006 Chg-P CR2E034 (11/05)

4. FEI Number 56-2325589		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BOLANOS, ENRIQUE 1411 SW 7TH AVE OKEECHOBEE, FL 34974		
7. Name and Address of New Registered Agent Name BOLANOS ENRIQUE Street Address (P.O. Box Number is Not Acceptable) 312 SW 7TH AVENUE City OKEECHOBEE FL Zip Code 34974		

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 Enrique Bolanos DATE FEB, 15, 2006

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOLANOS, ENRIQUE 1411 SW 7TH AVE OKEECHOBEE, FL 34974 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Enrique Bolanos DATE FEB, 15, 06 DAYTIME PHONE # 8633574500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR