

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025130

FILED
Jan 23, 2007
Secretary of State

Entity Name: SABRA INTERACTIVE INC.

Current Principal Place of Business:

19380 COLLINS AVENUE
416
AVENTURA, FL 33160

New Principal Place of Business:

19380 COLLINS AVENUE
514
AVENTURA, FL 33160

Current Mailing Address:

1326 PRESIDENT STREET
BROOKLYN, NY 11213

New Mailing Address:

19380 COLLINS AVENUE
514
AVENTURA, FL 33160

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSNER, MICHAL
19380 COLLINS AVENUE
416
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

ROSNER, MICHAL
19380 COLLINS AVENUE
514
AVENTURA, FL 33160 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: MICHAL ROSNER

01/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: BERCOVITS, RACHEL DIRECTO
Address: 19380 COLLINS AVENUE #416
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: BERCOVITS, RACHEL DIRECTO
Address: 19380 COLLINS AVENUE #514
City-St-Zip: AVENTURA, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the 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: RACHEL BERCOVITS

DIR

01/23/2007

Electronic Signature of Signing Officer or Director

Date