## **2008 FOR PROFIT CORPORATION**

of the corporation or the receiver or trustee changed, or on an attachment with art add

SIGNATURE:

s, with all other like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

May 02, 2008 08:00 AN Secretary of State **ANNUAL REPORT** DOCUMENT # P03000038313 1. Entity Name ATABEY, INC. Principal Place of Business Mailing Address 929 SW 149TH CT PO BOX 940776 MIAMI, FL 33184 MIAMI, FL 33194 DO NOT WRITE IN THIS SPACE 04292008 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 77-0596148 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GONZALEZ, MELQUIADES 929 SW 149TH CT MIAMI, FL 33184 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME GONZALEZ, MELQUIADES 929 SW 149TH ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33184 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 propowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

**FILED**