

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000117294

Entity Name: PHOBOS, INC.

FILED
Apr 07, 2006
Secretary of State

Current Principal Place of Business:

2801 NE 183RD ST APT #101
AVENTURA, FL 33160

New Principal Place of Business:

1085 99TH STREET
APT 4
BAY HARBOR ISLAND, FL 33154

Current Mailing Address:

2801 NE 183RD ST APT #101
AVENTURA, FL 33160

New Mailing Address:

1085 99TH STREET
APT 4
BAY HARBOR ISLAND, FL 33154

FEI Number: 20-1487728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE FREITAS, ANA L
2801 NE 183RD ST APT #101
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

DE FREITAS, ANA L
1085 99TH STREET
APT 4
BAY HARBOR ISLAND, FL 33154 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:

04/07/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DE FREITAS, ANA L
Address: 2801 NE 183RD ST APT #101
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DE FREITAS, ANA L
Address: 1085 99TH STREET
City-St-Zip: BAY HARBOR ISLAND, FL 33154

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: ANA LUCIA DE FREITAS

P

04/07/2006

Electronic Signature of Signing Officer or Director

Date