2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000122155

MOORE, PATRICIA

2632 SE 18TH COURT

CAPE CORAL, FL 33904

Name:

Address:

City-St-Zip:

Entity Name: SABO ENTERPRISES, INC.

FILED Apr 09, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1421 SE 31ST TERRACE CAPE CORAL, FL 33904 **Current Mailing Address: New Mailing Address:** 1421 SE 31ST TERRACE CAPE CORAL, FL 33904 FEI Number: 84-1634508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAMPINELLA, SALVATORE SR. 1421 SE 31ST TERRACE CAPE CORAL, FL 33904 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PAMPINELLA, SALVATORE SR. Name: Name: 1421 SE 31ST TERRACE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: MOORE, ROBERT J SR. Name: 2632 SE 18TH COURT Address: Address: CAPE CORAL, FL 33904 US City-St-Zip: City-St-Zip: () Delete Title: Title: SEC. () Change () Addition PAMPINELLA, BARBARA Name: Name: 1421 SE 31ST TERRACE Address: Address: City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: Title: TRS. () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: SALVATORE PAMPINELLA SR. P 04/09/2005