

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000132158

Entity Name: GOBLES INC

FILED
Aug 02, 2005
Secretary of State

Current Principal Place of Business:

1900 NW 97TH AVE., STE. 051-308453
MIAMI, FL 33172 US

New Principal Place of Business:

19877 EAST COUNTRY CLUB DR.
#401
AVENTURA, FL 33180 US

Current Mailing Address:

19877 EAST COUNTRY CLUB DR.
#401
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 20-1652883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKER, MICHAEL
19877 EAST COUNTRY CLUB DR.
401
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

LEIDERMAN, YACKELINE S
19877 EAST COUNTRY CLUB DR.
401
AVENTURA, FL 33180 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: YACKELINE S. LEIDERMAN

08/02/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAKER, MICHAEL
Address: 19877 EAST COUNTRY CLUB DR. APT#401
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEIDERMAN, YACKELINE S
Address: 19877 EAST COUNTRY CLUB DR. APT#401
City-St-Zip: AVENTURA, FL 33180 US

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.

SIGNATURE: YACKELINE S. LEIDERMAN

P

08/02/2005

Electronic Signature of Signing Officer or Director

Date