2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 16, 2007
Secretary of State

DOCUMENT# P06000104622

Entity Name: SOBE CRUISES 2, INC.

Current Principal Place of Business:

8725 N.W. 18 TERRACE
SUITE 301
MIAMI, FL 33172 US

New Principal Place of Business:

Current Mailing Address:

8725 N.W. 18 TERRACE
SUITE 301
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 20-8219743 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURAI WALD BIONDO MORENO & BROCHIN, P.A.
TWO ALHAMBRA PLAZA
PENTHOUSE 1B
CORAL, FL 33172 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PAS ( ) Delete
Name: CHAPUR, RODRIGO
Address: 8725 N.W. 18 TERRACE, SUITE 301
City-St-Zip: MIAMI, FL 33172

Title: VS ( ) Delete
Name: CHAPUR, PAOLA
Address: 8725 N.W. 18 TERRACE, SUITE 301
City-St-Zip: MIAMI, FL 33172

Title: VTAS (X) Delete
Name: CHAPUR, MARIEL
Address: 8725 N.W. 18 TERRACE, SUITE 301
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: CHAPUR, PAOLA
Address: 8725 N.W. 18 TERRACE, SUITE 301
City-St-Zip: MIAMI, FL 33172

Title: VTAS (X) Change ( ) Addition
Name: CHAPUR, MARIEL
Address: 8725 N.W. 18 TERRACE, SUITE 301
City-St-Zip: MIAMI, FL 33172

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PAOLA CHAPUR P 07/16/2007

Electronic Signature of Signing Officer or Director Date