2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117698

Entity Name: TOBO DEVELOPMENT INC.

FILED Jul 05, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

2611 NORTH RIVERSIDE DRIVE 5160 NE US1 HWY SUITE #504 PALM BAY, FL 32905 POMPANO BEACH. FL 33062

Current Mailing Address: New Mailing Address:

2611 NORTH RIVERSIDE DRIVE SUITE #504 POMPANO BEACH, FL 33062

FEI Number: 76-0837881 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VALE, CARLOS R

2611 NORTH RIVERSIDE DRIVE

SUITE #504

POMPANO BEACH, FL 33062 US

TAX HOUSE CORPORATION

1261 E SAMPLE RD

POMPANO BEACH, FL 33064 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: TAX HOUSE CORPORATION 07/05/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: () Change () Addition

 Name:
 VALE, CARLOS R
 Name:

 Address:
 2611 NORTH RIVERSIDE DRIVE SUITE #504
 Address:

 City-St-Zip:
 POMPANO BEACH, FL 33062
 City-St-Zip:

οις σε 2ιμ. Το οίνι Απο ΒΕΝΟΤ, τΕ 33002 οις σε 2ιμ.

Title: VP () Delete Title: VP (X) Change () Addition Name: CONSELLOS, JOAO PAULO Name: DO VALE, ALUIZ C

Address: 2611 NORTH RIVERSIDE DRIVE #504 Address: RUA JOSE GIESTAS CENTRO
City St Zin: AFONSO CLAUDIO ES RPAZIL ES 3:

City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: AFONSO CLAUDIO, ES - BRAZIL, ES 29600

 Name:
 Name:
 TONOLI, JOSE PAULO

 Address:
 Address:
 262 RODOVIA BR KM 95

City-St-Zip: City-St-Zip: DOMINGOS MARTINS, ES-BRAZI, ES 29278

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: CARLOS R VALE PRES 07/05/2007