2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000075377

Entity Name: BOBARINO'S INC.

FILED Jul 11, 2008 Secretary of State

20 MAGNOLIA AVE.

ENGLEWOOD, FL 34223 US

Current Mailing Address: New Mailing Address:

P.O. BOX 380143 P.O. BOX 1464

MURDOCK, FL 33938 US ENGLEWOOD, FL 34295 US

FEI Number: 26-1679744 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:

LEE, DAWNMARIE
20 MAGNOLIA AVE.
LEE, ROBERT
20 MAGNOLIA AVE.
20 MAGNOLIA AVE.

ENGLEWOOD, FL 34223 US ENGLEWOOD, FL 34223 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: ROBERT LEE 07/11/2008

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

 Name:
 LEE, DAWNMARIE
 Name:
 LEE, ROBERT

 Address:
 P.O. BOX 380143
 Address:
 P.O.BOX 1464

City-St-Zip: MURDOCK, FL 33938 US City-St-Zip: ENGLEWOOD, FL 34295 US

Title: VP (X) Delete Title: () Change () Addition

 Name:
 LEE, ROBERT
 Name:

 Address:
 P.O. BOX 380143
 Address:

 City-St-Zip:
 MURDOCK, FL 33938 US
 City-St-Zip:

Title: TR (X) Delete Title: () Change () Addition

 Name:
 LEE, ROBERT L
 Name:

 Address:
 P.O. BOX 380143
 Address:

 City-St-Zip:
 MURDOCK, FL 33938 US
 City-St-Zip:

Title: SEC (X) Delete Title: () Change () Addition

 Name:
 MALDONADO, DANIELLE
 Name:

 Address:
 P.O. BOX 380143
 Address:

 City-St-Zip:
 MURDOCK, FL 33938 US
 City-St-Zip:

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

 Name:
 Name:
 LEE, ROBERT

 Address:
 20 MAGNOLIA AVE.

 City-St-Zip:
 City-St-Zip:
 ENGLEWOOD, FL 34223 US

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: ROBERT LEE PRES 07/11/2008