

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000017527

Entity Name: HUBAI INC.

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5744 SABAL TRACE DR., #203  
N. PORT, FL 34287

**New Principal Place of Business:**

5744 SABAL TRACE DR., #203  
APT 203  
N. PORT, FL 34287 UN

**Current Mailing Address:**

5744 SABAL TRACE DR., #203  
N. PORT, FL 34287

**New Mailing Address:**

FEI Number: 27-2003944      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HUBAI, RITA  
5744 SABAL TRACE DR., #203  
N. PORT, FL 34287 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: PT  
Name: HUBAI, RITA  
Address: 5744 SABAL TRACE DR., #203  
City-St-Zip: N. PORT, FL 34287

I hereby 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 all other like empowered.

SIGNATURE: RITA HUBAI

P

04/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date