2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000031998

Entity Name: OBL SERVICES, INC.

FILED Mar 01, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	/ 64TH DRIVE ID, FL 33076				
Current N	lailing Addres	ss:	New Mailing Address:		
	/ 64TH DRIVE ID, FL 33076				
FEI Number	: 65-0831397	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of (Current Registered Agent:	Name and Address of	New Registered Agent:	
10910 NW	E, ODESSA B / 64TH DRIVE ID, FL 33076	US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (LACRUISE, OE 10910 NW 64T PARKLAND, FI	H DRIVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	D (LACRUISE, KE 10910 NW 64T PARKLAND, FI	H DRIVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: Citv-St-Zip:	SD (BLEASE, ALLY 761-5 COCO I PLANTATION.	PLUM CIRCLE	Title: (Name: Address: City-St-Zip:) Change ()Addition	

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: ODESSA LACRUISE D 03/01/2008