2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000086095

Entity Name: NIBRAKA GLOBAL, INC.

FILED Mar 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1042 BERKLEY ROAD AUBURNDALE, FL 33823 US **Current Mailing Address: New Mailing Address:** 4342 THOMASWOOD LANE WINTER HAVEN, FL 33880 US FEI Number: 38-3624334 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: PATEL, NILKANTHRAY A 1042 BERKLEY ROAD AUBURNDALE, FL 33823 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition Name: PATEL, NILKANTH Name: PATEL, NILKANTHRAY A 4342 THOMASWOOD LANE EAST 4342 THOMASWOOD LANE EAST Address: Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: WINTER HAVEN, FL 33880

Title: (X) Change () Addition Title: STD () Delete Name: PATEL. VAISHAKHA Name:

PATEL, VAISHAKHA N

4342 THOMASWOOD LANE EAST 4342 THOMASWOOD LANE EAST Address: Address: WINTER HAVEN, FL 33880 WINTER HAVEN, FL 33880 City-St-Zip: City-St-Zip:

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

KUNAL, N. PATGL KUNAL, PATEL N Name: Name:

4242 THOMASWOOD LN E. 4242 THOMASWOOD LN E Address: Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: WINTER HAVEN, FL 33880

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: KUNAL PATEL Τ 03/28/2009