

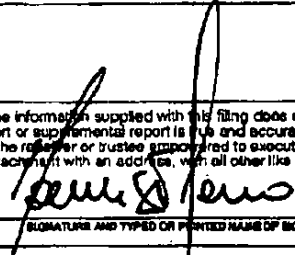
MAR 30 2006 16:30

PELICAN HOTEL AND CAFE

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90010 047 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000038554		
1. Entity Name TOBIA CORPORATION		
Principal Place of Business 834 OCEAN DR., APT. 402 MIAMI BEACH, FL 33139		Mailing Address C/O KAUFMAN, ROSS & CO 2689 S BAYSHORE DRIVE, SUITE 400 MIAMI, FL 33133
DO NOT WRITE IN THIS SPACE		
3. Name and Address of Current Registered Agent JOHNSON, ETHAN 200 S. BISCAYNE BLVD. 5300 FIRST UNION FINANCIAL CENTER MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOT E: Registered Agent signature required when reappointing) DATE _____		
FILE NOW!! FEB IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE	D	
NAME	ZANINI, STEFANO	
STREET ADDRESS	834 OCEAN DR., APT. 402	
CITY - ST - ZIP	MIAMI BEACH, FL 33139	
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerment.		
SIGNATURE:  01/30/06		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, OR DIRECTOR		