Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90096 034 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **L40142**

1. Corporation Name

obg ho	ILDINGS, INC								
Principal Place	e of Business	Mailing Address			_		NAME OF BEING AND STREET OF F) 	
3016 BIRKDALE STREET WESTON FL 33332 WESTON FL 33332					•				
US US				DO NOT WRITE IN THIS SPACE					
						Date Incorporated or Qualifed 12/29/1989			
2 Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Apr	lied For	
21		26				65-0188073	Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						· _	\$8.75 Ad	dditional	
22	27					5. Certifcate of Status Desired	Fee Req	juìred	
City & Stat				6. Election Campaign Financing Solution					
Zip	Country Zip Cou			intry		8. This corporation owes the current year In	tangible		
24	25	29 3	0			Personal Property Tax.	Yes	No	
•	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent	`	
AWNER, JONATHAN				81	Name Street /	ress (P.O. Box Number is Not Acceptable)			
C/O AKERMAN, SENTERFITT ET AL									
1 S.E. 3RD AVE28TH FLOOR				83					
MIAN	AI FL 33131			84	City	FI	85 Zip C	ode	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE						ed when reinstating) DATE		\	
40	Organization system and a second system and a second system as a secon			Agen	t signature re	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	DCP DELETE			13.		ADDITIONS/GRANGES TO GITTOERG	Change	Addition	
NAME	OFFERDAHL, JOHN			1.2 NAME				.	
	3016 BIRKDALE ST.			1.3 STREET ADDRESS					
STREET ADDRESS	WESTON FL 33332			1.4 CITY-ST-ZIP					
CITY-ST-ZIP	OST DELETE			2.1 TITLE			Change	Addition	
	OFFERDAHL, LYNN			2.2 NAME					
NAME	3016 BIRKDALE ST.				ADDDESS			J	
STREET ADDRESS	WESTON FL 33332			2.3 STREET ADDRESS					
CITY-ST-ZIP	WESTON FL 33332			2. 4 CITY-ST-ZIP 3.1 TITLE			Change	Addition	
TITLE									
NAME	garanta di kacamatan		B	3.2 NAME 3.3 STREET ADDRESS		and the second second	•	-	
STREET ADDRESS			1						
CITY-ST-ZIP			-	3.4. CITY-ST-ZIP 4.1 TITLE			Change	[] Addition	
TITLE				IAME					
NAME					4000000				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	4.4 C	ITY-S	i-ZIP		☐ Change	Addition	
7/17F	l •		3.1 I	LE	- 1				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attactiment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Change

☐ Addition