

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 30, 2007 08:00 AM  
Secretary of State

DOCUMENT # P00000021323

1. Entity Name  
DLBH, INC.



Principal Place of Business  
4766 HWY. 280  
BIRMINGHAM, AL 35242

Mailing Address  
4766 HWY. 280  
BIRMINGHAM, AL 35242



04162007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
58-2537115

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WARD, LORI ELLEN ESQ  
MATTHEWS & HAWKINS, P.A.  
607 HWY. 98 E.  
DESTIN, FL 32541

**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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PST  
OSBORN, MIKE E  
4766 HIGHWAY 280  
BIRMINGHAM, AL 35242

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
FLEISHER, DAVID E  
4766 HIGHWAY 280  
BIRMINGHAM, AL 35242

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
OSBORN, MARALS B  
4766 HWY 280  
BIRMINGHAM, AL 35242

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000741962  
05/15/07-80049-025 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 to this address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marcus Buster Osborn 4-24-2007 205-991-5035

Date

Daytime Phone #