FILED **A**]

ANNUAL REPORT			Apr 26, 2006 08:00		
DOCUMENT # P04641 1. Enlity Name OVERSEAS BUSINESS BUILDING, INC.	7 .				cretary of Sta
Principal Place of Business 40 SARASOTA CENTER BLVD., UNIT A SARASOTA, FL 34240 US	Mailing Address 40 SARASOTA CENTER BLVD., SARASOTA, FL 34240 US	UNIT A			
DO NOT WRITE I	N THIS SPA	CE	03212006 4. FEI Numbe 59-202	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
Name and Address of Current Reg					
RUSSELL, CASSANDRA M 40 SARASOTA CENTER BLVD., UNIT A SARASOTA, FL 34240				NOT WE	
The above named entity submits this statement for the the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and the statement for the state		ed office or register		th, in the State of Floric	ta. I am familiar with, and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.		noing \$5	.00 May Be led to Fees		
10. OFFICERS AND DIR	ECTORS + E				The second secon
TIFLE DT NAME BERBEY, DAPHNE STREET ADDRESS SALDUBA BUILDING, 53RD E. STR CITY-SI-ZIP PANAMA CITY, RE	BERBEY, DAPHNE SALDUBA BUILDING, 53RD E. STREET N/A		-	U0000 05/08/08)0536208 5-80083-022 150.(
NAME SERBEY, JULIO ANTONIO STREET ADDRESS SALDUBA BUILDING, 53RD E. STR CITY-ST-ZIP PANAMA CITY, RE	REET N/A	-			
TITLE PD NAME URRIOLA, JULIO A STREET ADDRESS SALDUBA BUILDING, 53RD E. STR CITY-ST-ZIP PANAMA CITY, RE	URRIOLA, JULIO A SALDUBA BUILDING, 53RD E. STREET N/A		DO	NOT WE	RITE
TIFLE NAME STREET ADDRESS CITY-ST-ZIP			IN T	THIS SPA	ACE
TITLE		1	,		

12. Thereby certify that the information supplied with this filling 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 of trustee empowered to execute this report as required by Chapter 507, 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 empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR

941-378-177 Dayline Phone #