

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000092409

Entity Name: OBM ADMINISTRATION, INC.

FILED
Jan 22, 2009
Secretary of State

Current Principal Place of Business:

2600 DOUGLAS RD
STE 308
CORAL GABLES, FL 33134

Current Mailing Address:

2600 DOUGLAS RD
STE 308
CORAL GABLES, FL 33134

New Principal Place of Business:

806 DOUGLAS ROAD
SOUTH TOWER, SUITE 400
CORAL GABLES, FL 33134

New Mailing Address:

806 DOUGLAS ROAD
SOUTH TOWER, SUITE 400
CORAL GABLES, FL 33134

FEI Number: 38-3724004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S BISCAYNE BLVD STE 1500(TJM)
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

WILSON, MICHAEL D
806 DOUGLAS ROAD
SOUTH TOWER, SUITE 400
CORAL GABLES, FL 33134 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: MICHAEL D. WILSON

01/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KULIG, DOUGLAS A P & D
Address: 2600 DOUGLAS ROAD, SUITE 308
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: GARCES, TANIA C D
Address: 2600 DOUGLAS ROAD, SUITE 308
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: WILSON, MICHAEL D & SEC
Address: 2600 DOUGLAS ROAD, SUITE 308
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KULIG, DOUGLAS A P & D
Address: 806 DOUGLAS ROAD, SOUTH TOWER, SUITE 400
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: GARCES, TANIA C D
Address: 806 DOUGLAS ROAD, SOUTH TOWER, SUITE 400
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: WILSON, MICHAEL D D & SEC
Address: 806 DOUGLAS ROAD, SOUTH TOWER, SUITE 400
City-St-Zip: CORAL GABLES, FL 33134

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: MICHAEL D. WILSON

DIR

01/22/2009

Electronic Signature of Signing Officer or Director

Date