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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025835 (5)

OEB, INC.

Principal Place of Business Mailing Address

FILED Apr 29 1997 8:00am Secretary of State



260 LAKEVIEW UMATILLA FL S		260 LAKEVIEW AVENUE UMATILLA FL 32784								
						3. Date incorporated or Qualified 03/18/1996	3a. Date of Last Report			
	lace of Business	2a, Mailing Address	2a, Mailing Address			4. FEI Number			Applied For	
21		26				59-3382485			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required	
		City & State	City & State			6. Election Campaign Financing	, , , , , , , , , , , , , , , , , , , ,			
23 Zip	Country	28	Cour	olev.		Trust Fund Contribution			d to Fees	
24	25	29	30	iii y		· -	liability for intangible tax under s. 199.032,			
	Current Registered Agent		10. Name and Address of New Registered Agent							
BEY	ER, RUTH			81 Na	rne					
260 LAKEVIEW AVENUE				82 Str	eat Addre	oss (P.O. Box Number is Not Acceptab	le)			
UMA	ATILLA FL 32784		<u> </u>				,			
			ŀ	83						
			ļ.	B4 Cit	у		FL	85 Zij	p Code	
11. Pursuant	to the provisions of Sections	607 0502 and 607 1508 Florida Statu	ites the ab	nvelnar	med corpo	oration submits this statement for the n		changing	its registered	
office or r	egistered agent, or both, in the	he State of Florida. Such change was he obligations of, Section 607.0505, F	authorized	by the	corporation	oration submits this statement for the p on's board of directors. I hereby accep	the appo	intrnent a	as registered	
•	in manimar with, and accept to	ne obligations of, dection 607.0305, F	ionua etate	nes.						
SIGNATURE	Signature, typed or printed harm of teg	estered agent and title it apposable (NC	M: Rugistured	Agentsign	ature require	ed where reinstaling)	DATE			
12.		ERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	D	☐ DELETE	14 700	LE	خ ا ⊢	res	l	Chango	Addition	
NAME	BÉYER, OTTO			WE						
STREET ADDRESS			1	KEET ADDR	ESS					
CITY-ST-ZIP TITLE	UMATILLA FL 32784 D	DELETE		Y-ST-ZIP		(=D)9E	1	Change	Addition	
NAME	BEYER, RUTH	_ battie	21 TITI 22 NAI		51	ec/ rices	ı	Grianiyi	AUURIORI :	
STREET ADDRESS	AAA I SICHI SINI ALISI KUUN			2.3 STREET ADDRESS		•				
CITY-ST-ZIP	UMATILLA FL 32784	_	2 4 CiTY-ST-ZIP							
TITLE	DELFTE 31						<u></u> 1	Change	Addition	
NAME			3.2 NAME					_		
STREET ADDRESS	s		3.3 STF	3.3 STREET ADDRESS						
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TITLE	DELETE 4			LF		·		Change	Addition	
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STREET ADDRESS			4 3 STF	RET ADDR	ESS					
CITY-ST-ZIP		Britis		Y-ST-7/P				C	a addres	
TITLE	☐ DELETE			5 1 TITLE			l	Change	e Addition	
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STREET ADDRESS				REET ADDR	155					
CITY-ST-ZIP TITLE			5.4 CITY - ST - ZIP 6.1 TITLE					Change	Addition	
NAME		DEFEIF	62 NAI				,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
STREET ADDRESS				eet aodr	ESS					
CITY-ST-ZIP				6.4 CITY - ST - 7IP						
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I do 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 eath, that I am an officer or director of the corporation or the receiver or Irustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

11-17 97