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PROFIT '
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthari

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000056475 (1)

OBIE, INC.

FILED Mar 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 801 BRICKELL KEY DR., STE. 206 601 BRICKELL KEY DR., STE. 206 MIAMI FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/26/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-076-588 21 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TRIBBLE, KEITH 601 BRICKELL KEY DR., STE. 206 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33131** 83 64 City 85 Zip Code 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 typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **BLUMBERG, PHILIP F** NAME 1.2 NAME 601 BRICKELL KEY DR., STE. 206 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33131** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE FAUERBACH, WILLIAM V NAME 2.2 NAME 601 BRICKELL KEY DR., STE. 206 STREET ADDRESS 23 STREET ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE THOMAS, STEWART P 3.2 NAME NAME 601 BRICKELL KEY DR., STE. 206 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 3.4. CITY-ST-ZIP ___ Addition DELETE Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 roport 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 of the period 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 changed, or a machinent with an address.