

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P98000064990** ✓
1. Corporation Name

DUBAH, INC.

Principal Place of Business Mailing Address
1080 W. BAY HARBOR DR #4C
BAY HARBOR ISLANDS FL 33154 US

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	7-15-1998	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	65-0913258	
24	Country	29	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
BERNARD REHHAUT 1080 W. BAY HARBOR DR #4C BAY HARBOR ISLANDS FL 33154 US				81 Name N/A	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City FL 85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE <input checked="" type="checkbox"/> DELETE				1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME REHHAUT, DINA				1.2 NAME 300002936933-4			
STREET ADDRESS 1080 W. BAY HARBOR DR #4C				1.3 STREET ADDRESS -07/20/99--01094--026			
CITY-ST-ZIP BAY HARBOR ISLANDS FL 33154 US				1.4 CITY-ST-ZIP *****70.00 *****70.00			
2.1 TITLE <input checked="" type="checkbox"/> DELETE				2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME WESTBROOK, DENISE				2.2 NAME			
STREET ADDRESS 1080 W. BAY HARBOR DR #4C				2.3 STREET ADDRESS			
CITY-ST-ZIP BAY HARBOR ISLANDS FL 33154 US				2.4 CITY-ST-ZIP			
3.1 TITLE <input type="checkbox"/> DELETE				3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME RVPD				3.2 NAME			
STREET ADDRESS REHHAUT BERNARD				3.3 STREET ADDRESS			
CITY-ST-ZIP 1080 W. Bay Harbor Dr # 4C				3.4 CITY-ST-ZIP			
Bay Harbor, FL 33154				4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME				4.2 NAME			
4.3 STREET ADDRESS				4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP				4.4 CITY-ST-ZIP			
5.1 TITLE <input type="checkbox"/> DELETE				5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
6.1 TITLE <input type="checkbox"/> DELETE				6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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 report 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BERNARD REHHAUT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-22-99

Date

Daytime Phone #

CR2E037 (11/98)