

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000080914

**Entity Name:** CFBNETWORK.COM, INC.

**Current Principal Place of Business:**

1565 N. PARK DRIVE  
102  
WESTON, FL 33326

**Current Mailing Address:**

1565 N. PARK DRIVE  
102  
WESTON, FL 33326 US

**FEI Number: 46-3780195**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FONDO, JAMES  
1565 N. PARK DRIVE  
102  
WESTON, FL 33326 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DP  
Name ADLER, DEAN  
Address 1565 N. PARK DRIVE, SUITE 103  
City-State-Zip: WESTON FL 33326

Title DVP  
Name FONDO, JAMES  
Address 1565 N. PARK DRIVE, SUITE 103  
City-State-Zip: WESTON FL 33326

Title DVP  
Name BENNETT, ED  
Address 1565 N. PARK DRIVE, SUITE 103  
City-State-Zip: WESTON FL 33326

Title T  
Name ADLER, ANA  
Address 1565 N. PARK DRIVE, SUITE 103  
City-State-Zip: WESTON FL 33326

*I hereby 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 all other like empowered.*

**SIGNATURE: JAMES FONDO**

**DVP**

**04/14/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date