


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 09, 2007 08:00 A
Secretary of State

DOCUMENT # F04000004100		
1. Entity Name AMERICAN FINANCIAL RESOURCES, INC.		
Principal Place of Business 273 E MAIN ST DENVER, NJ 07834 US	Mailing Address 273 E MAIN ST DENVER, NJ 07834 US	



02082007 No Chg-P CR2E034 (11/05)

4. FEI Number 22-3554558	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 32301-2960**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DUBNOFF, RICHARD 273 E MAIN ST DENVER, NJ 07834
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DUBNOFF, COREY 273 E MAIN ST DENVER, NJ 07834
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LANNO, KENNETH 273 E MAIN ST DENVER, NJ 07834
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEIDEN, LEONARD 273 E MAIN ST DENVER, NJ 07834
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP YUSKANICH, MICHAEL 273 E. MAIN ST DENVER, NJ 07834
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000630517
02/20/07-80009-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD DUBNOFF 2/8/07 973-404-1918
Date Daytime Phone #