

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 18, 2001 08:00 AM**
Secretary of State**DOCUMENT # F95000002725**1. Entity Name
D.B.M. FORCE INC.

Principal Place of Business

7521 NW 6TH CT

Mailing Address

PO BOX 17115

PLANTATION

33317

US

FL

PLANTATION

333187115

US

FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0595816

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BRAMY DIDIER
7521 NW 6TH CTPLANTATION
333171006

FL

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

04/18/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME BRAMY D ENISE
STREET ADDRESS 7521 NW 6TH CT
CITY-ST-ZIP PLANTATION FL 33317TITLE D ☒ Change ☐ Addition
NAME BERLIOUX BENEDICTE
STREET ADDRESS 11 GEORGES HILL ROAD
CITY-ST-ZIP NEWTON CTTITLE VD ☐ Delete
NAME ODILE MARTIN
STREET ADDRESS 11 GEORGES HILL ROAD
CITY-ST-ZIP NEWTON CTTITLE D ☒ Change ☐ Addition
NAME BRAMY DENISE
STREET ADDRESS 7521 NW 6TH CT
CITY-ST-ZIP PLANTATION FL 33317TITLE PDST ☐ Delete
NAME BRAMY DIDIER
STREET ADDRESS 7521 NW 6TH CT
CITY-ST-ZIP PLANTATION FL 33317TITLE VD ☒ Change ☐ Addition
NAME MARTIN ODILE
STREET ADDRESS 11 GEORGES HILL ROAD
CITY-ST-ZIP NEWTON CTTITLE D ☐ Delete
NAME BERLIOUX BENEDICTE
STREET ADDRESS 11 GEORGES HILL RD
CITY-ST-ZIP NEWTON CTTITLE PDST ☒ Change ☐ Addition
NAME BRAMY DIDIER
STREET ADDRESS 7521 NW 6TH CT
CITY-ST-ZIP PLANTATION FL 33317TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIDIER BRAMY

P

04/18/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)