2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002725

Entity Name: D.B.M. FORCE INC.

FILED Apr 23, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

<UNUSED>

PLANTATION, FL 33317 US

5801 NW 63RD PL PARKLAND, FL 33067 US

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Current Mailing Address:

New Mailing Address:

BRAMY, DIDIER

PO BOX 17115

PLANTATION, FL 333187115 US

FEI Number: 65-0595816 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRAMY, DIDIER 7521 NW 6TH CT

7521 NW 6TH CT 5801 NW 63RD PL PLANTATION, FL 333171006 PARKLAND, FL 333067

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: 04/23/2004

Electronic Signature of Registered Agent Date

Title:

Title:

Title:

Name:

Address:

Address:

City-St-Zip:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

(X) Change () Addition

() Change () Addition

Title: PDST () Delete
Name: BRAMY, DIDIER
Address: 7531 NM 6TH CT

Address: 7521 NW 6TH CT City-St-Zip: PLANTATION, FL 33317

Title: VD () Delete
Name: MARTIN, ODILE

Name: MARTIN, ODILE
Address: 11 GEORGES HILL ROAD

Address: 11 GEORGES HILL ROA City-St-Zip: NEWTON, CT

Title: D (X) Delete Name: BRAMY, DENISE

Address: 7521 NW 6TH CT
City-St-Zip: PLANTATION, FL 33317

Title: D (X) Delete
Name: BERLIOUX, BENEDICTE

Address: 11 GEORGES HILL ROAD
City-St-Zip: NEWTON, CT

(X) Delete Title: RLIOUX, BENEDICTE Name:

Title: () Change () Addition Name:

PDST

VD

BRAMY, DIDIER

MARTIN, ODILE

5801 NW 63RD PL

PARKLAND, FL 33067

5801 NW 63RD PL

PARKLAND, FL 33067

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DIDIER BRAMY P 04/23/2004