

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000002725

FILED
Apr 20, 2003
Secretary of State

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

Current Principal Place of Business:

7521 NW 6TH CT
PLANTATION, FL 33317 US

New Principal Place of Business:

<UNUSED>
PLANTATION, FL 33317 US

Current Mailing Address:

PO BOX 17115
PLANTATION, FL 333187115 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

BRAMY, DIDIER
7521 NW 6TH CT
PLANTATION, FL 333171006

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDST () Delete
Name: BRAMY, DIDIER
Address: 7521 NW 6TH CT
City-St-Zip: PLANTATION, FL 33317

Title: VD () Delete
Name: MARTIN, ODILE
Address: 11 GEORGES HILL ROAD
City-St-Zip: NEWTON, CT

Title: D () Delete
Name: BRAMY, DENISE
Address: 7521 NW 6TH CT
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: BERLIOUX, BENEDICTE
Address: 11 GEORGES HILL ROAD
City-St-Zip: NEWTON, CT

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

04/20/2003

Electronic Signature of Signing Officer or Director

_____ Date