

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90014 014 ***150.00

DOCUMENT # L33809 1. Entity Name DBL, INC.			
Principal Place of Business 1001 NORTH US HWY 1 SUITE 800 JUPITER, FL 33477		Mailing Address 1001 NORTH US HWY 1 SUITE 800 JUPITER, FL 33477	
2. Principal Place of Business 3801 PGA BLVD Suite, Apt. #, etc. SUITE 555 City & State PALM BEACH GARDENS, FL Zip 33410 Country USA		3. Mailing Address 3801 PGA BOULEVARD Suite, Apt. #, etc. SUITE 555 City & State PALM BEACH GARDENS, FL Zip 33410 Country USA	
			
		03252004 Chg-P CR2E034 (10/03)	
4. FEI Number 65-0169606		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILSON, HUNTER S. 1001 NORTH US HWY 1 SUITE 800 JUPITER, FL 33477		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P PERRY, HENRY A. <input type="checkbox"/> Delete	TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS	1001 NORTH US HWY 1 STE 800	STREET ADDRESS	3801 PGA BOULEVARD, SUITE 555
CITY-ST-ZIP	JUPITER, FL 33477	CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	ST <input type="checkbox"/> Delete	TITLE	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS	1001 NORTH US HWY 1	STREET ADDRESS	3801 PGA BOULEVARD SUITE 555
CITY-ST-ZIP	JUPITER, FL 33477	CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	<input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date _____ Daytime Phone # _____	