**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M99873

1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

DBR MA	rketing, inc.							
Principal Place of Business Mailing Address					T 1001 6015 TO THE TOTAL TO THE TOTAL TO THE TOTAL THE T		11111   11	OII 91911 120
382 BROAD AVI NAPLES FL 339		382 BROAD AVENUE SOUTH NAPLES FL 33940			DO NOT WRITE IN	THIS SPAC	É	
					3. Date Incorporated or Qualifed 09/21/1988			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		App	lied For
21		26			65-0071730	65-0071730 Not Applicab		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	29 24 10 2 30	Country		This corporation owes the current year     Personal Property Tax.	ar Intangible Ye		□No
	9. Name and Address of Curre		1		10. Name and Address of New Registe	ered Agent		
GARLICK, THOMAS B. 8889 PELICAN BAY BLVD SUITE 300				81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83				
NAPLES FL 34108			84	City	1,1	FL 85	Zip Ĉ	ode
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Statem familiar with, and accept the oblig	e of Florida. Such change was auth	orized by	the corpo	corporation submits this statement for the purpor oration's board of directors. I hereby accept the a	se of chang	ing its i	registered jistered
SIGNATURE	Signature, typed or printed name of registered ag	pent and title if applicable. (NOTE: Rec	gistered Ager	it signature ri	equired when reinstating) DAT	E		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER			
TITLE	Р	☐ DELETE				<b>≥</b> C)	nange	Additi
NAME	ROBERTS, EUGENIE BODICK		1.2 NAME		CG 12 m A/C SO:			
STREET ADDRESS 6891 13TH AVE S			1.3 STREET ADDRESS 6		689 13714 AVE SO. NAPOLES, FL-34102			
CITY-ST-ZIP	NAPLES FL		1.4 CITY-S	T-ZIP	NAPIES, FL 34102			

DELETE

DELETE

3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 51 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE TITLE 6.2 NAME NAME

2.3 STREET ADDRESS

2. 4 CITY-ST-ZIP

21 TITLE

2.2 NAME

3.1 TITLE

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

EUGENIE BODICK ROBBOTS

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90073 020 \*\*\*150.00

Addition

☐ Addition

Addition

Applied For Not Applicable

☐ Change

☐ Change