

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90038 008 ****61.25

DOCUMENT # N02000005423

1. Entity Name
DR. B'S ASSEMBLIES, INC.



Principal Place of Business
**270 RIVERSIDE DRIVE
PALM BEACH GARDENS, FL 33410**

Mailing Address
**270 RIVERSIDE DRIVE
PALM BEACH GARDENS, FL 33410**

24009493



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02012004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number

16-1617434

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATE CREATIONS NETWORK, INC.
941, FOURTH STREET, #200
MIAMI BEACH, FL 33139**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BARANYI, HELMUT**
CITY - ST - ZIP **270 RIVERSIDE DRIVE
PALM BEACH GARDENS, FL 33410**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BARANYI, CAROL A**
CITY - ST - ZIP **270 RIVERSIDE DRIVE
PALM BEACH GARDENS, FL 33410**

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **BARANYI, CHRISTOPHER**
CITY - ST - ZIP **10847 GLEN COVE CIRCLE, #208
ORLANDO, FL 32817**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **CARMEN MANZONELLI**
CITY - ST - ZIP **2601 PAULORI DRIVE
ORLANDO, FL 32835**

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **MATTHEW CLARK**
CITY - ST - ZIP **200 RAMBLE WOOD DRIVE
SANFORD, FL 32773**

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **JAN D. PUTERBAUGH**
CITY - ST - ZIP **120 BORADA ROAD
SANFORD, FL 32773**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 617, 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:

Helmut Baranyi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HELMUT BARANYI 2/4/04 (561)-626-1696
Date Daytime Phone #