2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P0000086615 1. Entity Name DBN GROUP, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90257 021 ***150.00

Principal Plac	ce of Business	Mailing Address						
2893 LAKE WOODWARD DRIVE EUSTIS FL 32776		10263 WEATHERLY ROAD BROOKSVILLE FL 34601						
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2. Principal P	Place of Business	3. Mailing Address						
	AKE WOODWALD DRIVE							11801 9111 1841
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NO	OT WRITE IN THIS	SPACE	
City & Stat	e	City & State		4. F	El Number		I A	pplied For
EVSTIS					59-367308	35	N	ot Applicable
Zip *	Country	Zip	Country	5. (Certificate of Status De	esired 🗀	\$8.75 Ad	
32726_	6. Name and Address of Current	Registered Agent	1-	7. N	lame and Address of	f New Registered	Fee Require	30
			Name					
	GEL & UTRERA, P.A.		Street Address (P.C		ox Number is Not Acc	ceptable)		
	ALMERIA AVENUE AL GABLES FL 33134		- Cived Nadica					
CON	AL GADLES FL 33134		ĺ					
			City			FI	Zip Cod	de
8 The above	named entity submits this statement for	or the nurnose of changing it	ts registered office of	or registered and	ent or both in the Sta		-	
0. 7110 00010	That to a state of the state of	or the purpose of changing in	ta registerea anide e	i registered ag	ent, or boar, in the ota	ile of Florida.		
SIGNATURE .								
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NC	TE: Registered Agent signa	ture required when re	instating)	DATE		
	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangible		OTE: Registered Agent signa				05.6	<u> </u>
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of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352-589-0700

Daytime Phone #