

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007451

FILED
Apr 15, 2004
Secretary of State

Entity Name: DP FINANCIAL SERVICES, INC.

Current Principal Place of Business:

7587 W SAND LAKE RD
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7587 W SAND LAKE RD
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 26-0040870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, HARRY
7587 W SAND LAKE RD
ORLANDO, FL 32819

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: D () Delete
Name: LEVINE, HARRY
Address: 1025 W OAK RIDGE RD
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: BARBER, ROBERT A II
Address: 2321 STATE RD 580
City-St-Zip: CLEARWATER, FL 33763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEVINE, HARRY
Address: 7587 W SAND LAKE ROAD
City-St-Zip: ORLANDO, FL 32819

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: HARRY LEVINE

D

04/15/2004

Electronic Signature of Signing Officer or Director

Date