## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # P03000059530

1. Entity Name DUBOW ENTERPRISES, INC.



Principal Place of Business

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

4801 EXECUTIVE PARK COURT BLDG 100 JACKSONVILLE, FL 32216

Mailing Address

4801 EXECUTIVE PARK COURT BLDG 100 JACKSONVILLE, FL 32216

FILED 05 JUN -6 PM 4:02 SECRETARY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

01242005 No Cha-P CR2E034 (10/03)

Applied For 4. FEI Number 20-0081004 Not Applicable \$8.75 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

DUBOW, MICHAEL I 4801 EXECUTIVE PARK COURT BLDG 100 JACKSONVILLE, FL 32216

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the ptions of registered agent.	ourpose of changing its register	red office or r	egistered agent, or bo	oth, in the State of Florida. I am f	amiliar with, and acce	₽P
SIGNATURE.		••••					
	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Register	ed Agent signature	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.	~ —	\$5.00 May 8 1	DOO558345 7/0501006001	5 <b>69</b> **300.00	
10.	OFFICERS AND DIREC	CTORS	0.000000000		<u> </u>		000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUBOW, MICHAEL I 4801 EXECUTIVE PARK COURT BLD JACKSONVILLE, FL 32216	OG 100					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUBOW, LAWRENCE J 4801 EXECUTIVE PARK COURT BLDG 100 JACKSONVILLE, FL 32216						
NAME STREET ADDRESS CITY-ST-ZIP	D DUBOW, SUSAN E 4801 EXECUTIVE PARK COURT BLD JACKSONVILLE, FL 32216	G 100		DO	NOT WRITE		

IN THIS SPACE

12. I hereby certify that the information supplied with this filling 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 receivery 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 of the corporation of the receivery trustee empowered.

SIGNATURE: 2