

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000021656

Entity Name: D.B.D. SERVICES OF FLORIDA, INC.

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

250 AUSTRALIAN AVENUE SOUTH
W. PALM BEACH, FL 33401

New Principal Place of Business:

1801 S. AUSTRALIAN AVENUE
W. PALM BEACH, FL 33409

Current Mailing Address:

40 RANDALL AVENUE
FREEPORT, NY 11580

New Mailing Address:

40 RANDALL AVENUE
ROOM 109
FREEPORT, NY 11520

FEI Number: 11-3204975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: P () Delete
Name: STAVIN, MARK
Address: 250 AUSTRALIAN AVENUE SOUTH
City-St-Zip: W. PALM BEACH, FL 33401

Title: ST () Delete
Name: SCHWARTZ, ROBERT
Address: 250 AUSTRALIAN AVENUE SOUTH
City-St-Zip: W. PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STAVIN, MARK
Address: 1801 S. AUSTRALIAN AVENUE
City-St-Zip: W. PALM BEACH, FL 33409

Title: ST (X) Change () Addition
Name: SCHWARTZ, ROBERT
Address: 1801 S. AUSTRALIAN AVENUE
City-St-Zip: W. PALM BEACH, FL 33409

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARK STAVIN

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date