2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000060382

Entity Name: DFB ENTERPRISES, INC.

910 SOUTHEAST 11TH STREET

DEERFIELD BEACH, FL 33441

Address: City-St-Zip: FILED Apr 21, 2003 Secretary of State

•		. — — . ,			
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
3907 N. FE	EDERAL HWY	′			
STE 184 POMPANO BCH, FL 33064					
	,				
Current Mailing Address:			New Mailing Addres	s:	
3907 N. FEDERAL HWY					
STE 184 POMPANO	D BCH, FL 33	064			
FEI Number: 65-0767832 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
PHILLY, FRANCES 1408 SW FIRST AVE DERFIELD BCH, FL 33491			PHILY, FRANCES 1408 SW FIRST AVE DEERFIELD BCH, FL		
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE: FRANCE	ES PHILY (NAME & ZIP CORE	RECTION)	04/21/2003	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PHILY, DONA 1408 SW FIRS		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PHILY, FRAN 1408 SW FIRS) Delete ST AVE EACH, FL 33441	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	STD (CARUSO, ROI) Delete BERT N	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT N CARUSO STD 04/21/2003