

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000056564  
1. Entity Name  
D N F GROUP, INC.



Principal Place of Business      Mailing Address  
22170 SANDS POINTE DRIVE      22170 SANDS POINTE DRIVE  
BOCA RATON, FL 33433      BOCA RATON, FL 33433



04142005      No Chg-P      CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
65-0845555      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

DEFINI, CATHERINE A  
22170 SANDS PT DR  
BOCA RATON, FL 33433

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	DE FINI, CATHERINE A
STREET ADDRESS	22170 SANDS POINTE DRIVE
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	ST
NAME	LORY, DENISE A
STREET ADDRESS	22170 SANDS PT. DR.
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	VP
NAME	DEFINI, BRIGETTE T
STREET ADDRESS	22170 SANDS PT. DR.
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	T
NAME	DEFINI, CATHY M
STREET ADDRESS	22170 SANDS PT. DR.
CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000335243  
04/27/05-80080-007 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 receiver or 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 with an address, with all other like empowers.

SIGNATURE: *Catherine A. Defini*      Date: 4/21/05      Daytime Phone #: 561 470 0160