

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000103304

FILED
Apr 15, 2009
Secretary of State**Entity Name:** DBG MANAGEMENT CORPORATION**Current Principal Place of Business:**14502 N. DALE MABRY
SUITE 200
TAMPA, FL 33618 US**New Principal Place of Business:**5211 JOSEPH CLOSE RD
PLANT CITY, FL 335653174 US**Current Mailing Address:**14502 N. DALE MABRY
SUITE 200
TAMPA, FL 33618 US**New Mailing Address:**5211 JOSEPH CLOSE RD
PLANT CITY, FL 335653174 US**FEI Number:** 59-3546130**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GORDON, DAVID
14502 N DALE MABRY
SUITE 200
TAMPA, FL 33618 US**Name and Address of New Registered Agent:**GORDON, DAVID
4012 72ND AVE
SARASOTA, FL 34243 US

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:

04/15/2009

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: GORDON, DAVID
Address: 14502 N DALE MABRY SUITE 200
City-St-Zip: TAMPA, FL 33618 US**Title:** TS () Delete
Name: STARFORD, LILAN
Address: 5211 JOSEPH CLOSE
City-St-Zip: PLANT CITY, FL 335653174 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: GORDON, DAVID
Address: 4012 72ND AVE
City-St-Zip: SARASOTA, FL 34243 US**Title:** TS (X) Change () Addition
Name: STARFORD, LILAN
Address: 5211 JOSEPH CLOSE RD
City-St-Zip: PLANT CITY, FL 335653174 US

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: LILAN B. STARFORD

TS

04/15/2009

Electronic Signature of Signing Officer or Director_____
Date