

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000057107

Entity Name: D GROUP ACQUISITION FOUR (FL), INC.**Current Principal Place of Business:**3947 BOULEVARD CENTER DRIVE
SUITE 5
JACKSONVILLE, FL 32207**Current Mailing Address:**3947 BOULEVARD CENTER DRIVE
SUITE 5
JACKSONVILLE, FL 32207 US**FEI Number:** 39-2056232**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHRITTON, J.KIRBY
1301 RIVERPLACE BLVD., SUITE 1500
JACKSONVILLE, FL 32207 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	DUBON, MYRTA
Address	3947 BOULEVARD CENTER DRIVE SUITE 5
City-State-Zip:	JACKSONVILLE FL 32207

Title	D
Name	DUBON, DESIREE
Address	3947 BOULEVARD CENTER DRIVE SUITE 5
City-State-Zip:	JACKSONVILLE FL 32207

Title	D
Name	DUBON, MANUEL
Address	3947 BOULEVARD CENTER DRIVE SUITE 5
City-State-Zip:	JACKSONVILLE FL 32207

Title	D
Name	DUBON, JOSE R
Address	3947 BOULEVARD CENTER DRIVE SUITE 5
City-State-Zip:	JACKSONVILLE FL 32207

Title	D
Name	DUBON, LUIS E III
Address	3947 BOULEVARD CENTER DRIVE SUITE 5
City-State-Zip:	JACKSONVILLE FL 32207

Title	D
Name	DUBON, MARILYN C JR.
Address	3947 BOULEVARD CENTER DRIVE SUITE 5
City-State-Zip:	JACKSONVILLE FL 32207

I hereby 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 all other like empowered.

SIGNATURE: MANUEL H. DUBON**PRESIDENT****03/15/2017**

Electronic Signature of Signing Officer/Director Detail

Date