

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)							
1. Name and Address of Reporting Person <sup>*</sup> BLUE MELISSA R	2. Date of Event Requiring Statement (Month/Day/Year) 09/10/2003		and Ticker or Trading Symbol AF CAPITAL PARTNERS INC [BDLF]				
(Last) (First) (Middle) 6330 MCLEOD DR., SUITE 7	09/10/2003	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) LAS VEGAS, NV 89120		(Check all applicable) Director 10% Owner X_Officer (give title Other (specify below) CORPORATE SERCRETARY		cify	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)	Table I	[ - Non-Deriva	tive Securities	Benef	icially Owned		
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)		4. Natur (Instr. 5	e of Indirect Beneficial Ownership )		
Common Stock	1,000,000		D				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable		3. Title and Amount of 4. Conver		4. Conversion	5. Ownership	6. Nature of Indirect Beneficial	
(Instr. 4)	and Expiration Date		Securities Underlying Derivative		or Exercise	Form of	Ownership	
	(Month/Day/Year)		Security		Price of	Derivative	(Instr. 5)	
			(Instr. 4)		Derivative	Security: Direct		
	Date	Expiration		Amount or Number of	Security	(D) or Indirect		
Exer	Exercisable	able Date	Title	Shares		(I) (Instr. 5)		

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BLUE MELISSA R 6330 MCLEOD DR., SUITE 7 LAS VEGAS, NV 89120			CORPORATE SERCRETARY				

## Signatures

/s/ Melissa R. Blue	09/12/2003
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

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