2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 529206

1. Entity Name

DIVERSIFIED FLORIDA INVESTMENTS CORP.



Principal Place of Business

P.O. BOX 11072 FORT LAUDERDALE, FL 33339 Mailing Address

P.O. BOX 11072

FORT LAUDERDALE, FL 33339





DO NOT WRITE IN THIS SPACE

02162007 Na Chg-P C

CR2E034 (11/05)

4. FEI Number 59-1729392

Applied For Not Applicable

5. Certificate of Status Desired ---

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Apont

O'CONNOR, KIERAN ESQ. 111 N ORANGE AVE STE 1020 ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

ORLANDO), FL 32801					
8. The above the obligat	named entity submits this statement for the pur ions of registered agent.	pose of changing its register	ed office or reg	istered agent, or bo	oth, in the State of Floric	la. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if a	ppicable. (NOTE: Registere	d Agent signature re	guired when reinstating)		DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECT	ORS		gar a r		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ECHARTE, FELIPE J 2749 NE 18TH ST FORT LAUDERDALE, FL 33305					00703752 7-80153-007 150.0
THTLE NAME STREET ADDRESS CITY-ST-ZIP	VAT ECHARTE, MARIA J 1411 SARRIA AVE. CORAL GABLES, FL 33146				and the second of the second o	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ARELLANO, MARIA T 8580 SCHOOL HOUSE RD. MIAMI, FL 33143	- 1		DO	NOT WI	
TITLE NAME STREET ADDRESS CITY-ST-2IP	VP ECHARTE, MIGUEL 104 CRANDON BLVD., STE. 306A KEY BISCAYNE, FL. 33149			1	THIS SP	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	÷	*) b	the same of the sa			And the same of the same and the
CH 1 - 31 - 21F			3.5			 A. A. A. A. A. Special Conference on the Conference on t

12. Thereby certify that the information supplies with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplementar upon it 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 truefee 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 of the receiver of truefee empowered.

NONATURE MINING PRO

NAME STREET ADORESS CITY-ST-ZIP

4.11.2007