

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90310 013 ***158.75

DOCUMENT # P94000093276

1. Entity Name
DIETER INVESTMENTS, INC.

Principal Place of Business
**104 CEAVON BLVD
 STE 421 D
 KEY BISCAIYNE FL 33149**

Mailing Address
**104 CRANDON BLVD
 421-D
 KEY BISCAIYNE FL 33149
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
104 CRANDON BOULEVARD
 Suite, Apt. #, etc.
#409

3. Mailing Address
104 CRANDON BOULEVARD
 Suite, Apt. #, etc.
#409

City & State
KEY BISCAIYNE

City & State
KEY BISCAIYNE

4. FEI Number **65-0566943**

Applied For
 Not Applicable

Zip
33149

Country
USA

Zip
33149

Country
USA

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

6. Name and Address of Current Registered Agent

**RODRIGUEZ, MARIA C
 104 CRANDON BLVD
 STE 421-D
 KEY BISCAIYNE FL 33149**

7. Name and Address of New Registered Agent

Name
RESEARCH MANAGEMENT CORPORATION
 Street Address (P.O. Box Number is Not Acceptable)
104 CRANDON BOULEVARD
#409
 City
KEY BISCAIYNE FL Zip Code
33149

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.

SIGNATURE **SHARI PORTER** **4/5/01**
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D SAN MIGUEL, ALBERTO	690 WARREN LANE	KEY BISCAIYNE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	D ALBERTO SAN MIGUEL	104 CRANDON BOULEVARD, #409	KEY BISCAIYNE, FLORIDA 33149	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ALBERTO SAN MIGUEL**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01
Date

305 361-2555
Daytime Phone #

0186678

CR2E034 (10/00)