

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000051483

FILED
Mar 30, 2003
Secretary of State

Entity Name: NELSON DIEZ & ASSOCIATES, INC.

Current Principal Place of Business:

4160 N. ARMENIA AVE.
STE. C
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

4160 N. ARMENIA AVE.
STE. C
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-3390458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIEZ, NELSON S
1048 SYLVIA LANE
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

DIEZ, NELSON S
3917 W. DALE AVE.
TAMPA, FL 33609 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

03/30/2003

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIEZ, NELSON
Address: 1048 SYLVIA LANE
City-St-Zip: TAMPA, FL 33613

Title: VP () Delete
Name: DIEZ, NELSON
Address: 1048 SYLVIA LANE
City-St-Zip: TAMPA, FL 33613

Title: S () Delete
Name: DIEZ, SHERRY
Address: 1048 SYLVIA LANE
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIEZ, NELSON
Address: 3917 W. DALE AVE.
City-St-Zip: TAMPA, FL 33609 US

Title: VP (X) Change () Addition
Name: DIEZ, NELSON
Address: 3917 W. DALE AVE.
City-St-Zip: TAMPA, FL 33609 US

Title: S (X) Change () Addition
Name: DIEZ, SHERRY
Address: 3917 W. DALE AVE.
City-St-Zip: TAMPA, FL 33609 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NELSON DIEZ

Electronic Signature of Signing Officer or Director

P

03/30/2003

Date