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: ZELIDED DIAZ

Electronic Signature of Signing Officer/Director Detail

SIGNATURE:

### . .. \_ С

City-State-Zip: DORAL FL 33178

Officer/Director Detail :			
Title	PD	Title	VP
Name	DIAZ, JOSE G	Name	DIAZ, ZELIDED
Address	11501 LAKESIDE DRIVE #6309	Address	11501 LAKESIDE DRIVE #6309
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178
Title	SEC		
Name	RODRIGUEZ, VIVIANA M		
Address	11501 LAKESIDE DRIVE #6309		

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.

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

8725 NW 18TH TERRACE STE 204 MIAMI, FL 33172

# **Current Mailing Address:**

8725 NW 18TH TERRACE SUITE 204

### FEI Number: 65-0989049

MIAMI, FL 33172

11501 LAKESIDE DRIVE

DORAL, FL 33178 US

DIAZ, JOSE G

#6309

Entity Name: FOURDIAZ DESIGN, INC.

**Current Principal Place of Business:** 

### 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P00000012793

FILED Feb 20, 2017 Secretary of State CC2997173208

Certificate of Status Desired: No

02/20/2017 Date

**VP/DIR OPERATIONS** 

Date