

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000002788

**Entity Name:** DIOGENES GROUP RESEARCH, INC.

**Current Principal Place of Business:**

15241 KESTRELRISE DRIVE  
LITHIA, FL 33547

**Current Mailing Address:**

15241 KESTRELRISE DRIVE  
LITHIA, FL 33547

**FEI Number:** 20-8236670

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TODD, VICTOR LMR  
15241 KESTRELRISE DRIVE  
LITHIA, FL 33547 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

|                 |                      |                 |                      |
|-----------------|----------------------|-----------------|----------------------|
| Title           | MR.                  | Title           | MRS                  |
| Name            | TODD, VICTOR LMR.    | Name            | TODD, TRACY L        |
| Address         | 15241 KESTRELRISE DR | Address         | 15241 KESTRELRISE DR |
| City-State-Zip: | LITHIA FL 33547      | City-State-Zip: | LITHIA FL 33547      |

*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:** VICTOR TODD

**PRESIDENT**

**01/29/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date