

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000004791

Entity Name: DIVERSIFIED GROUP BROKERAGE CORPORATION**Current Principal Place of Business:**369 NORTH MAIN STREET
MARLBOROUGH, CT 06447**Current Mailing Address:**369 NORTH MAIN STREET
MARLBOROUGH, CT 06447 US**FEI Number:** 06-1029392**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSINESS FILINGS INCORPORATED
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:** CHRIS DAS

02/08/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GOODISON, BROOKS
Address 369 NORTH MAIN STREET
City-State-Zip: MARLBOROUGH CT 06447

Title VICE-PRESIDENT
Name SOLEAU, CHARLIE
Address 369 NORTH MAIN STREET
City-State-Zip: MARLBOROUGH CT 06447

Title SECRETARY
Name SOUCIER, DANIEL
Address 369 NORTH MAIN STREET
City-State-Zip: MARLBOROUGH CT 06447

Title TREASURER
Name SOUCIER, DANIEL
Address 369 NORTH MAIN STREET
City-State-Zip: MARLBOROUGH CT 06447

Title DIRECTOR
Name SOUCIER, DANIEL
Address 369 NORTH MAIN STREET
City-State-Zip: MARLBOROUGH CT 06447

Title DIRECTOR
Name SOLEAU, CHARLIE
Address 369 NORTH MAIN STREET
City-State-Zip: MARLBOROUGH CT 06447

Title DIRECTOR
Name GOODISON, BROOKS
Address 369 NORTH MAIN STREET
City-State-Zip: MARLBOROUGH CT 06447

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: DANIEL SOUCIER**DIRECTOR**

02/08/2023

Electronic Signature of Signing Officer/Director Detail

Date