FILED Feb 19, 2008 8:00 am Secretary of State

2008	FOR PROF	IT CORP	ORATION
	ANNUA	L REPOR	RT

DOCUMENT # F02000003271 1. Entity Name DIETZ SUPPLY CO.								02-19-200	•			
Principal Place of Business Mailing Address						L		AUU	401			
11450 KREUTZER ROAD HUNTLEY, IL 60142				11450 KREUTZER ROAD HUNTLEY, IL 60142				. •				
Principal Place of Business - No P.O. Box # 3. M.				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			01082008	Chg-P	CR2E	034 (12/06)		
City & State			City & State				4. FEI Numb 36-358			h	pplied For of Applicable	
Zip		Country		Zip Cour		itry		5. Certificate of Status Desired			\$8.75 Additional Fee Required	
	6. Name	and Address of Curren	Regis	tered Agent		Ness		7. Name and	Address of New	Registered	Agent	
ARYELAN, JAMIE 13131 56TH CT.				Name Street Address (P.O. Box Number is Not Acceptable)								
SUITE 302 CLEARWA		33760										
						City				FI	Zip Cod	e
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. I am familiar with, and accent the obligations of registered agent.												and accept
SIGNATURE												
FILE NOWILI FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.												
10.		OFFICERS AND	DIRE	CTORS	11.			ADDITIONS	L /CHANGES TO O	FFICERS AN	D DIRECTOR	SINTI
TITLE NAME	PD Delete TITL DIETZ, RICHARD ANA									Change	Addition	
STREET ADDRESS CITY-ST-ZIP						EET ADDRESS '-ST-ZIP						
TITLE NAME	VD □ Delete IIII DIETZ, ROBERT NAM									Change	Addition	
STREET ADDRESS CITY-ST-ZIP	11450 KREUTZER ROAD SIR					EET ADORESS '-ST-ZIP						
TITLE NAME	VD Delete TITL							******			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP						EET ADORESS '-ST-ZIP						
TITLE	SD X Delete TITL				Ę	SD.	»(C) 2.)	2 <u>2</u> CH5116)	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	· ·				ee'i address (-st-zip	300	D KUER	ROCHELLE ATZER RO L 60142	AIS			
TITLE	TD			☐ Delete	TITL		11007	- 10 - 2/(11	C (0.11 C		☐ Change	Addition
NAME STREET ADDRESS	SOWINSKI, ROCHELLE 11450 KREUTZER ROAD STR				AE Eet address							
CITY-\$1-ZIP					Y-ST-ZIP			<u> </u>			····	
TITLE NAME				Delete	TITL						☐ Change	Addilien
STREET ADDRESS CITY+S1-ZIP						EET ADDRESS /-\$t-zip						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNATURE: Ken Sapak Ken Szpak 2-14-08 847-669-9700												
		SIGNATURE AND TYPED OF	PRINTE	D NAME OF SIGNING OFFICE	OR DIREC	TOR			Oate		Шаулисе Роцее и	