

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06872

FILED
Mar 02, 2005
Secretary of State

Entity Name: DIVERSIFIED ENGINEERING INTERNATIONAL, INCORPORATED

Current Principal Place of Business:

5378 RIVERVIEW DRIVE
ST AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

5378 RIVERVIEW DRIVE
ST AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 59-2048743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DRYGAS, THOMAS
5378 RIVERVIEW DR.
SAINT AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DRYGAS, THOMAS C.J.
Address: 5378 RIVERVIEW DRIVE
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VS () Delete
Name: DRYGAS, NOELLE D.D.
Address: 5378 RIVERVIEW DR
City-St-Zip: ST AUGUSTINE, FL 32080

Title: VP (X) Delete
Name: HUBERT, JERZY Z
Address: 8018 DEGAS COURT
City-St-Zip: JACKSONVILLE, FL 32277

Title: VPE () Delete
Name: BURNS, CHARLES
Address: M1 SENECA BLVD.
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: DRYGAS, NOELLE D.D.
Address: 5378 RIVERVIEW DR
City-St-Zip: ST AUGUSTINE, FL 32080

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BURNS, CHARLES
Address: M1 SENECA BLVD.
City-St-Zip: WINTER SPRINGS, FL 32708

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: THOMAS CJ DRYGAS

PD

03/02/2005

Electronic Signature of Signing Officer or Director

_____ Date