

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
**1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 MAY 31 AM 9:38

**DOCUMENT # F48800 (9)**

1. Corporation Name  
**DIAZ MOVING, INC.**

Principal Place of Business      Mailing Address  
**9973 SW 3RD ST.      9973 SW 3RD ST.**  
**MIAMI FL 33174-1834      MIAMI FL 33174-1834**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified      3a. Date of Last Report  
**10/22/1981      05/01/1994**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
<b>21</b>	<b>26</b>	<b>59-2204211</b>	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
<b>22</b>	<b>27</b>	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	City & State	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>23</b>	<b>29</b>		
Zip	Country	Zip	Country
<b>24</b>	<b>25</b>	<b>29</b>	<b>30</b>

**9. Name and Address of Current Registered Agent**

**DIAZ, FERNANDO**  
**9973 SW 3RD STREET**  
**MIAMI FL 33174**

**10. Name and Address of New Registered Agent**

<b>B1</b> Name	<b>DIAZ, JESUS C.</b>
<b>B2</b> Street Address (P.O. Box Number is Not Acceptable)	<b>11070 S.W. 32nd St.</b>
<b>B3</b>	
<b>B4</b> City	<b>Miami FL</b>
<b>B5</b> Zip Code	<b>33165</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]*      **JESUS C. DIAZ**      DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and his or her address (NOTE: Registered Agent signature required when reinstating)

**12. OFFICERS AND DIRECTORS**

TITLE	<b>PD</b>
NAME	<b>DIAZ, FERNANDO</b>
STREET ADDRESS	<b>9973 S.W. 3RD ST.</b>
CITY - ST - ZIP	<b>MIAMI FL 33155</b>
TITLE	<b>VD</b>
NAME	<b>DIAZ, JESUS C</b>
STREET ADDRESS	<b>11070 S.W. 32ND ST.</b>
CITY - ST - ZIP	<b>MIAMI FL 33155</b>
TITLE	<b>TD</b>
NAME	<b>DIAZ, ESTRELLA</b>
STREET ADDRESS	<b>9973 S.W. 3RD ST.</b>
CITY - ST - ZIP	<b>MIAMI FL 33174</b>
TITLE	<b>SD</b>
NAME	<b>DIAZ, FERNANDO A</b>
STREET ADDRESS	<b>7800 S.W. 62ND ST.</b>
CITY - ST - ZIP	<b>MIAMI FL 33155</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<b>P/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>DIAZ, JESUS C. DIAZ</b>
1.3 STREET ADDRESS	<b>11070 S.W. 32nd St.</b>
1.4 CITY - ST - ZIP	<b>Miami, Fl. 33165</b>
2.1 TITLE	<b>S/T/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>DIAZ, ESTRELLA</b>
2.3 STREET ADDRESS	<b>9973 S.W. 3rd St.</b>
2.4 CITY - ST - ZIP	<b>Miami, Fl. 33174</b>
3.1 TITLE	<b>V/D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	<b>DIAZ, FERNANDO A.</b>
3.3 STREET ADDRESS	<b>7600 S.W. 62nd St.</b>
3.4 CITY - ST - ZIP	<b>Miami, Fl. 33143</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *[Signature]*      **JESUS C. DIAZ**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR