

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90145 007 ***150.00

DOCUMENT # K46259

1. Entity Name
DIEZ-MORA ARCHITECTS, INC.

Principal Place of Business Mailing Address
~~4070 SW 72ND AVE~~ **275 Fontainebleau Blvd.** 275 FONTAINEBLEAU BLVD
SUITE 107 247 STE 247
MIAMI FL 33155 33172 MIAMI FL 33172
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **275 Fontainebleau Blvd**
 Suite, Apt. #, etc. **Suite 247**
 City & State **Miami, FL**

3. Mailing Address
 Suite, Apt. #, etc.
 City & State

4. FEI Number **65-0091442** Applied For
 Not Applicable

Zip **33173** Country **US** Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MORA, RICHARD P
~~4070 SW 72 AVE~~ **275 Fontainebleau Blvd.**
SUITE 107 247
MIAMI FL 33155 33172

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable) **275 Fontainebleau Blvd**
Suite 247
 City **Miami** FL Zip Code **33172**

8. 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: DATE: **4/17/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	DIEZ, PEDRO
STREET ADDRESS	275 FONTAINEBLEAU BLVD, SUITE 247
CITY-ST-ZIP	MIAMI FL 33172
TITLE	D <input type="checkbox"/> Delete
NAME	MORA, RICHARD
STREET ADDRESS	275 FONTAINEBLEAU BLVD, STE 247
CITY-ST-ZIP	MIAMI FL 33172
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D Diez, Pedro
STREET ADDRESS	5001 SW 74th Court, suite 105
CITY-ST-ZIP	Miami, FL 33155
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **4/17/02** **305-228-6602**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFR2E034 (9/01)