2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# K69264

Entity Name: DIVERSIFIED CORPORATE ENTERPRISES, INC.

Current Principal Place of Business:

% DOTTIE ADAMS
3049 CREEKWOOD DR.
CANTONMENT, FL 32533

New Principal Place of Business:

Current Mailing Address:

% DOTTIE ADAMS
3049 CREEKWOOD DR.
CANTONMENT, FL 32533

New Mailing Address:

FEI Number: 59-2949135 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADAMS, DOTTIE
3049 CREEKWOOD DR.
CANTONMENT, FL 32533 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: VPTS ( ) Delete
Name: ADAMS, DOTTIE
Address: 3049 CREEKWOOD DR.
City-St-Zip: CANTONMENT, FL 325337512

Title: PC ( ) Delete
Name: ADAMS, MICHAEL J
Address: 3049 CREEKWOOD DR
City-St-Zip: CANTONMENT, FL 325337512

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DOTTIE ADAMS VP 04/28/2005

Electronic Signature of Signing Officer or Director — Date