
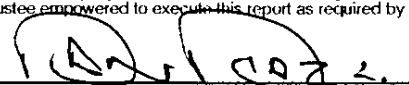


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 03, 2005 8:00 am
Secretary of State

08-03-2005 90020 009 ****50.00

DOCUMENT # L03000051319 1. Entity Name DIAZ IRON DESIGNS, LLC					
Principal Place of Business P.O. BOX 152191 TAMPA, FL 33684			Mailing Address P.O. BOX 152191 TAMPA, FL 33684		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip Country		Zip Country		07282005 Chg-LLC CR2E083 (10/03)	
4. FEI Number 36-4545805				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent DIAZ, DAN 3922 W. POWHATAN AVENUE TAMPA, FL 33614	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DIAZ, DAN 3922 W. POWHATAN AVENUE TAMPA, FL 33614	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOPEZ, JESUS J 3922 W. POWHATAN AVE. TAMPA, FL 33614	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>DAN DIAZ</u>  <u>07-28-05</u> <u>813-413 5553</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					

ATTACHMENT

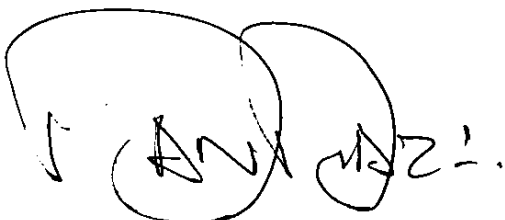
20066042

LO3000051319

July 28-2005

Department of State
Tallahassee FL.

Please accept this payment for
the Annual Report of DIAZ Iron
Designs LLC in the amount of
\$.50.00. I Am Late because I
NEVER Received the notification
about the payment.

A handwritten signature in black ink, appearing to read "DAN DIAZ". The signature is stylized with large, overlapping loops.

DAN DIAZ
DIAZ IRON DESIGNS LLC.