

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000048972

FILED
Jan 16, 2009
Secretary of State

Entity Name: DIAZ & DIAZ PROPERTIES, LLC

Current Principal Place of Business:

10434 N. FLORIDA AVE.
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

10434 N. FLORIDA AVE.
TAMPA, FL 33612

New Mailing Address:

FEI Number: 38-3783247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, DARREN M
10434 N. FLORIDA AVE,
TAMPA, FL 33612 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DIAZ, DARREN M
Address: 3121 RESEDA CT.
City-St-Zip: TAMPA, FL 33618

Title: MGRM () Delete
Name: DIAZ, ODALIS L
Address: 3121 RESEDA CT.
City-St-Zip: TAMPA, FL 33618

Title: MGRM () Delete
Name: DIAZ, MANUEL III
Address: 1004 CENTERBROOK DR.
City-St-Zip: BRANDON, FL 33511

Title: MGRM () Delete
Name: DIAZ, SANDRA A
Address: 1004 CENTERBROOK DR.
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES:

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

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

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DARREN DIAZ

MGRM

01/16/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date