


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # M09491 1. Entity Name HUMBERTO DIAZ INC.	
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Principal Place of Business C/O HUMBERTO DIAZ 9769 S.W. 72 ST. MIAMI, FL 33173-4615	Mailing Address C/O HUMBERTO DIAZ 9769 S.W. 72 ST. MIAMI, FL 33173-4615
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01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2477452	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIAZ, HUMBERTO
9330 SW 42ND. TERR.
MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE

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)

Signature, typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVD DIAZ, HUMBERTO 9330 SW 42ND. TERR. MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD DIAZ, HUMBERTO, JR. 11335 SW 73RD TERRACE MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVD DIAZ, AIDA 9330 SW 42ND. TERR. MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/01/06-80037-014 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HUMBERTO DIAZ - PRES.  305-274-7127

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #