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_y 2001 U	NIFORM	BUSINESS	REPORT	(UBR)
	NT # N/11			

NAME

CITY-ST-ZiP

SIGNATURE:

DILLARD, JOHN

MIAMI FL

1885 NW 55TH ST

May 15, 2001 8:00 am Secretary of State OCCUMENT # IVITOOSS 1. Entity Name 05-15-2001 90043 036 ***158.75 DIVERSIFIED UNITED BUSINESS SERVICES CORPORATION Principal Place of Business Mailing Address 95 PT 87 35 89 89 8 46 3840 NW 187TH ST. 3840 NW 187TH ST. CAROL CITY FL 33055 CAROL CITY FL 33055 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2561651 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THOMPSON, LEROY, SR. Street Address (P.O. Box Number is Not Acceptable) 3840 N.W. 187TH STREET MIAMI FL 33055 Zip Code ubmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida (NOTE: Registered Agent signature required when reinstating) 9. This corporation is elig FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete LINER, SAMUS THOMPSON, LEROY NAME NAME STREET ADDRESS 3840 NW 187TH ST. STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP CAROL CITY FL 33055 awards, Ebenezer Change TITLE ☐ Delete TITLE NAME EDWARDS, THELMA NAME 17301 N.W. 20 Ave OPA-Locka Fla 33054 STREET ADDRESS 2450 N. W. 141 ST. STREET ADDRESS CITY-ST-7IP OPALOCKA FL 33054 CITY-ST-ZIP JONES, Afred 18520 N.W 23 AVE ☐ Change Addition ☐ Delete TITLE NAME RODDY, DAVID B NAME STREET ADDRESS 18740 NW 41 AVE STREET ADDRESS Miani Fla CITY-ST-ZIP CITY-ST-ZIP CAROL CITY FL TITLE ☐ Delete TITLE ☐ Change Addition NAME THOMPOSN, LILLIE M 1970 N.W 1545T OPA-LOCKA Fla 33054 STREET ADDRESS 3840 NW 187 ST STREET ADDRESS CITY - ST - ZIP CAROL CITY FL CITY-ST-7IP ☐ Delete TITLE Neal Lucinda Change Addition 460 N. W. 153 St. 504 - Locka Fla 33054 MOORE, ALICE NAME NAME STREET ADDRESS 8503 N.W. 22 AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

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.

OPA-LOCK 9 Fla 33054

305-625-2160