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Apr 07, 2003 8:00 am
Secretary of State
04-07-2003 90136 030 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #M15533

90073221

1. Entity Name
DIVERSIFIED UNITED BUSINESS SERVICES CORPORATION

Principal Place of Business	Mailing Address
3840 NW 187TH ST. CAROL CITY, FL 33055 US	3840 NW 187TH ST. CAROL CITY, FL 33055 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2561651 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired X **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
THOMPSON, LEROY, SR. 3840 N.W. 187TH STREET MIAMI, FL 33055	Name Lillie S. Thompson Street Address (P.O. Box Number is Not Acceptable) 3840 N.W. 187 St. City Carol City FL Zip Code 33055

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: X Lillie Thompson 4-01-03
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LINCE, SAMUEL 1211 SESAME ST OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Edward Ebenezer 17301 N.W. 20th St OPA-Locka Fla 33054	☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M LINER, PATRICIA 1211 SESAME ST OPALOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Lillie Thompson 3840 NW 187 ST Carol City Fla 33055	☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M ONEIL, EUGENE 1970 NW 154TH ST OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Thelma Edwards 2450 NW 44 St OPA-Locka FL 33054	☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M ORR, JOHNNY 15241 RAILROAD DR OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Alice Moore 850 3 N.W. 22 Ave Miami, Fla	☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M ORR, JOHNNY 15241 RAILROAD DR OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member John Dillard 1885 N.W. 55 St. Miami Fla	☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M HARRIS, CHARLES 2020 N. W 175ST OPA LOCKA, FL 33056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Alfred Sons 1850 N.W. 23 Ave Miami Fla	☐ Change X Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Lillie Thompson VP 4-1-03 305-685-2606
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment #

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Zip / Country	Zip / Country

4. FEI Number 59-2561651 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMPSON, LEROY, SR.
3840 N.W. 187TH STREET
MIAMI, FL 33056

7. Name and Address of New Registered Agent

Name Lillie Thompson
Street Address (P.O. Box Number is Not Acceptable)
3840 N.W. 187 ST.
City Carol City FL Zip Code 33055

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 Lillie Thompson 4-01-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LINCE, SAMUEL 1211 SESAME ST OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Angela I Thompson 3840 N.W. 187 ST. Miami Fla 33055	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M LINER, PATRICIA 1211 SESAME ST OPALOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member David B. Roddy 18740 N.W. 41 Ave Carol City	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M ONEIL, EUGENE 1970 NW 154TH ST OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member Lucinda Oneil 1961 N.W. 153 ST. OPA-locka Fla 33054	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M ORR, JOHNNY 15241 RAILROAD DR OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member George Robinson 831 N.W. 179 St Miami Fla 33169	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M ORR, JOHNNY 15241 RAILROAD DR OPA LOCKA, FL 33054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M HARRIS, CHARLES 2020 N. W 175ST OPA LOCKA, FL 33056	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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SIGNATURE: Lillie Thompson 4-01-03 305-6253160
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #