



2006 FOR PROFIT CORPORATION ANNUAL REPORT

150

DOCUMENT # P01000039285 1. Entity Name DIAZ & COOPER ADVERTISING, INC.						FILED 06 MAR 28 PM 4:08 TALLAHASSEE, FLORIDA			
Principal Place of Business 8190 SW 148 DRIVE MIAMI, FL 33158				Mailing Address 8190 SW 148 DRIVE MIAMI, FL 33158					
2. Principal Place of Business <i>9200 So. Dadeland Blvd</i> Suite, Apt. #, etc. <i>Suite 220</i> City & State <i>Miami</i>		3. Mailing Address Suite, Apt. #, etc. <i>SAME</i> City & State							
Zip <i>33156</i>		Country <i>USA</i>						4. FEI Number 65-1093058	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent COOPER, THOMAS T JR 8190 SW 148 DRIVE MIAMI, FL 33158				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 acknowledge the obligations of registered agent. SIGNATURE <i>Thomas T Jr Cooper</i> <i>3/15/06</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>									
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00				9. Election Campaign Financing <input type="checkbox"/> \$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	PSD <input type="checkbox"/> Delete DIAZ-COOPER, OTMARA J 8190 SW 148 DRIVE MIAMI, FL 33158			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input type="checkbox"/> Delete COOPER, THOMAS T JR 8190 SW 148 DRIVE MIAMI, FL 33158			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add				

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, changed, or on an attachment with an address, with all other like empowered.

Thomas T Jr Cooper *3/15/06*