2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093850

Entity Name: DIVERSIFIED SPECIALIST INC

FILED Feb 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

605 SW 64 TERRACE 4613 N. UNIVERSITY DRIVE MARGATE, FL 33068

#387

CORAL SPRINGS, FL 33067

Current Mailing Address: New Mailing Address:

605 SW 64 TERRACE 4613 N. UNIVERSITY DRIVE MARGATE, FL 33068 #387

CORAL SPRINGS, FL 33067

FEI Number: 04-3586954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOBBAN, NORMAN MR CREARY, ALTHEA MRS 4448 INVERRARY BLVD 4613 N. UNIVERSITY DRIVE

US LAUDERHILL, FL 33319 #387 CORAL SPRINGS, FL 33067 US

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: ALTHEA CREARY 02/10/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete CREARY, SANDY I MR Name: 90 CITRU PARK LANE Address:

City-St-Zip: BOYNTON BEACH, FL 33436

() Delete Title: VΡ Name: HIGGINS, MAXINE A MRS 5501 SW 12TH STREET Address: PAMPANO BEACH, FL 33068 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

CREARY, SANDY I MR Name:

4613 N. UNIVERSITY DRIVE, #387 Address: City-St-Zip: CORAL SPRINGS, FL 33067

Title: (X) Change () Addition

Name: CREARY, ALTHEA A MRS

Address: 4613 N. UNIVERSITY DRIVE, #387 CORAL SPRINGS, FL 33067 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: ALTHEA CREARY 02/10/2007