2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P01000103961

Entity Name: DIVERSIFIED IT SOLUTIONS INC.

Current Principal Place of Business:

8362 PINES BLVD, SUITE 422
PEMBROKE PINES, FL 33024

New Principal Place of Business:

9600 NW 25 STREET
SUITE 5-D
MIAMI, FL 33172 US

Current Mailing Address:

8362 PINES BLVD, SUITE 422
PEMBROKE PINES, FL 33024

New Mailing Address:

9600 NW 25 STREET
SUITE 5-D
MIAMI, FL 33172 US

FEI Number: 65-1148585 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CELADA, HERNANDO J
8362 PINES BLVD, SUITE 422
PEMBROKE PINES, FL 33024

Name and Address of New Registered Agent:

CELADA, HERNANDO
9600 NW 25 STREET
SUITE 5-D
MIAMI, FL 33172 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: HERNANDO CELADA 04/29/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVTS ( ) Delete
Name: CELADA, HERNANDO
Address: 8362 PINES BLVD, SUITE 422
City-St-Zip: PEMBROKE PINES, FL 33024

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CELADA, HERNANDO
Address: 9600 NW 25 ST, SUITE 5-D
City-St-Zip: MIAMI, FL 33172 US

Title: D ( ) Change (X) Addition
Name: BENAVIDES, CARLOS
Address: 9600 NW 25 ST, SUITE 5-D
City-St-Zip: MIAMI, FL 33172 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: HERNANDO CELADA D 04/29/2004
Electronic Signature of Signing Officer or Director Date