2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 31, 2006 08:00 AN DOCUMENT # P01000118081 **Secretary of State** 1. Entity Name DIAZ EXPRESS, INC. Principal Place of Business Mailing Address 17665 N.W. 87TH COURT P.O. BOX 171713 HIALEAH, FL 33018 HIALEAH, FL 33017-1713 01182006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1159309 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent DIAZ, YANELYS DO NOT WRITE 17665 N.W. 87TH COURT HIALEAH, FL 33018 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent a greature required when reinstating) FILE NOW!!! FEE (\$ \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PTD TERLE DIAZ, YANELYS NAME STREET ADDRESS 17665 N.W. 87TH COURT CITY-ST-ZIP HIALEAH, FL 33018 SVD TITLE DIAZ. MIGUEL NAME STREET ADDRESS 17665 N.W. 87TH COURT CITY-ST-7IP HIALEAH, FL 33018 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TILE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TIDE NAME STREET ADDRESS CITY-ST-7IP TILE NAME STREET ADDRESS CITY-ST-ZIP

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12. Thereby certify that the information supplied with this filling does not quality 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

August 10. The corporation of 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 the corporation or an attachment with an address, with all other like empowered.