.2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jan 22, 2007 08:00 AM Secretary of State **DOCUMENT # P01000118081** 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 01182007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1159309 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 U00000597051 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE DIAZ, YANELYS STREET ADDRESS 17665 N.W. 87TH COURT CITY-ST-ZIP HIALEAH, FL 33018 TITLE SVD NAME DIAZ, MIGUEL STREET ADDRESS 17665 N.W. 87TH COURT CITY-ST-ZIP HIALEAH, FL 33018 NAME STREET ADDRESS DO NOT WRITE City-St-ZiP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE

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

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

FILED