FILED
Apr 07, 2003 8:00 am
Secretary of State

03-20-2003 90159 023 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000024949

1. Entity Name

DIEZ & DIEZ, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
320 S. Flamingo Road	320 S. Flamingo Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pembroke Pines, Florida	City & State: Pembroke Pines, Florida
Zip: 33027 Country:	Zip: 33027 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 450471039 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Bruce Iden

Street Address (P.O. Box Number is Not Acceptable): 3240 Corporate Way

City: Miramar FL Zip Code: 33025

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 _____ 4/1/03

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when name listed) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President/Director
NAME	Felipe Diez
STREET ADDRESS	320 S. Flamingo Road
CITY-ST-ZIP	Pembroke Pines, FL 33027
TITLE	V.P./Director
NAME	Virginia Diez
STREET ADDRESS	320 S. Flamingo Road
CITY-ST-ZIP	Pembroke Pines, FL 33027
TITLE	Secretary/Treasurer
NAME	Susan Diez
STREET ADDRESS	320 S. Flamingo Road
CITY-ST-ZIP	Pembroke Pines, FL 33027
TITLE	
NAME	
STREET ADDRESS	
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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowerments.

SIGNATURE: Felipe D. Diez Felipe Diez, President (954) 435-5577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #