

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2004 8:00 am
Secretary of State

05-07-2004 90114 032 ***150.00

DOCUMENT # P02000130798

1. Entity Name
DIET CONTROL CORPORATION



Principal Place of Business
13120 S.W. 92 AVENUE
SUITE D-506
MIAMI, FL 33176

Mailing Address
13120 S.W. 92 AVENUE
SUITE D-506
MIAMI, FL 33176

66428668



06152004 Chg-P CR2E034 (10/03)

2. Principal Place of Business

1221 BRICKELL AVE
Suite, Apt. #, etc.
9TH FLOOR

3. Mailing Address

1221 BRICKELL AVE
Suite, Apt. #, etc.
9TH FLOOR

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33131

Country

U.S.A.

Zip

33131

Country

U.S.A.

4. FEI Number
NOT APPLICABLE

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESGUERRA, GEORGE
13120 S.W. 92 AVENUE
SUITE D-506
MIAMI, FL 33176

7. Name and Address of New Registered Agent

Name
GEORGE ESGUERRA
Street Address (P.O. Box Number is Not Acceptable)
1221 BRICKELL AVE, 9TH FLOOR
City
MIAMI FL Zip Code
33131

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

GEORGE ESGUERRA
Signature, typed or printed name of registered agent and title if applicable.

GEORGE ESGUERRA

(NOTE: Registered Agent signature required when reinstating)

APRIL 30-04

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PST
ESGUERRA, GEORGE
13120 S.W. 92 AVE., SUITE D-506
MIAMI, FL 33176 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HERNANDEZ, HUGO G
400 NW 23 PL
MIAMI, FL 33125 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GEORGE ESGUERRA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

786

APRIL 30-04 344-9000