

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

08-20-2003 90052 031 ***150.00

DOCUMENT # P02000135638

1. Entity Name
DIEGO, INC.



Principal Place of Business
1080 94TH STREET
APT. 403
MIAMI FL 33134

Mailing Address
1080 94TH STREET
APT. 403
MIAMI FL 33134

55056050

2. Principal Place of Business
9601 Collins Avenue

3. Mailing Address

☐ CHECK HERE IF MAKING CHANGES

City & State
Miami FL

City & State
FL

4. FEI Number
74-3073885

Applied For
Not Applicable

Zip
33154

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLORIDA STATE INCORPORATION SERVICES, INC.
8689 PLUTO TERRACE
LAKE PARK FL 33403

Name
Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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 signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CASTILLA, DIEGO, M.
1080 94TH STREET, APT 403
MIAMI FL 33154 ☐ Delete

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

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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11503

Date

Daytime Phone #

CR2034 (4/03)

attachment

55056050
~~XXXXXXXXXX~~

DIEGO, INC.
9601 COLLINS AVENUE
MIAMI, FL 33154
(305) 864-2054

P02000135638

August 13, 2003

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P. O. BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

RE:P02000135638

I recently received a second notice for the Uniform Business Report. Unfortunately, I never received the first application. Attached is a payment for \$150.00. Due to the above mentioned, please abate penalties. Thank you in advance for your cooperation.

Sincerely,

Diego Castillo
President

