2004 FOR PROFIT CORPORATION

Jun 22, 2004 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # P03000061751 1. Entity Name 06-22-2004 90001 013 ***150.00 DAIG. BUSINESS GROUP, CORP Principal Place of Business Mailing Address 4995 NW 72 AVE #409 4995 NW 72 AVE #409 MIAMI, FL 33166 MIAML FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06142004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20- *0051115* Not Applicable 2ip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PARADA, ALEX 4995 NW 72 AVE #409 Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33166 City FI 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 it applicable (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees Due by September 8, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. HILF TITLE Change Delete ☐ Addition LINARES LIMBOR NAME LINARES, LIMBER NAME 4995 NW . 77 Nue . # 409 4995 NW 72 AVE #409 STREET ADDRESS STREET ADDRESS CTY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP Minui TLUNION 33166 TITLE ☐ Delete TITLE ☐ Addition VENEGAS JENNYR M NAME NAME STREET ADDRESS 4995 NW 72 AVE #409 STREET ADDRESS 72 CHTY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP 33160 TITLE TITI F Addition Delete ON VOIN PARADAS, ALEX NAME NAME WW. 72 KUC # 409 STREET ADDRESS 4995 NW 72 AVE #409 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP Pl. 33166 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE _ Detete TITLE Change _ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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:

ALX /ARADA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15/04

FILED

Affachment 54058388

Daig Business Group, Corp

4995 N.W. 72 Avenue, Suite #409 Miami Florida, 33166 Tel.: (305) 500-9884

June 14, 2004

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

P.O. Box 6327 Tallahassee, Fl. 32314

Re. P03000061751

To Whom It May Concern:

Please be advised that I did not receive the 2004 form or due to the facts that I am still living in Venezuela. I appeal to you under the circumstances, to kindly waive the late penalty of \$400 and accept the completed UBR and check in the late amount of \$150 to reactivate Daig Business Group, Corp.

Thank You for your prompt attention in this matter

Sincerely,

Alex Parada