2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000095634

Entity Name: DIVERSIFIED FINANCIAL STRATEGIES, CORP.

FILED Jun 16, 2<u>00</u>9 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

731 SANTURCE AVENUE CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

731 SANTURCE AVENUE CORAL GABLES, FL 33134

FEI Number: 25-1913562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FERNANDEZ, JORGE A CASTRO, VIVIAN 150 ALHAMBŘA CIRCLE 731 SANTURCE AVENUE **SUITE 1240** CORAL GABLES, FL 33143 CORAL GABLES, FL 33134 US

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.

SIGNATURE: VIVIAN CASTRO 06/16/2009

> Electronic Signature of Registered Agent Date

> > Title:

VPD

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

VPD

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PSD () Delete Title: (X) Change () Addition CASTRO, VIVIAN CASTRO, VIVIAN Name: Name: 731 SANTURCE AVENUE 731 SANTURCE AVENUE Address: Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33143

(X) Change () Addition () Delete CASTRO, ALEXANDRA CASTRO, ALEXANDRA Name: Name: 731 SANTURCE AVENUE 731 SANTURCE AVENUE Address: Address: CORAL GABLES, FL 33134 CORAL GABLES, FL 33143 City-St-Zip: City-St-Zip:

Title: VPD Title: (X) Change () Addition () Delete **VPD**

CASTRO, NICOLE CASTRO, NICOLE Name: Name: 731 SANTURCE AVENUE 731 SANTURCE AVENUE Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33143

Title: **VPD** () Delete Title: VPD (X) Change () Addition

CASTRO, GAUDENCIO A CASTRO, GAUDENCIO A Name: Name: Address: 731 SANTURCE AVENUE Address: 731 SANTURCE AVENUE City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 CORAL GABLES, FL 33143

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VIVIAN CASTRO **PSD** 06/16/2009