

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2005 8:00 am
Secretary of State

04-06-2005 90113 044 ***150.00

DOCUMENT # P04000041122 1. Entity Name G&G DIAZ & ASSOCIATES INC.					
Principal Place of Business 823 NE 199TH STREET 101 NORTH MIAMI BEACH, FL 33179 US			Mailing Address 823 NE 199TH STREET 101 NORTH MIAMI BEACH, FL 33179 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-0826658	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DIAZ, GUILLERMO 823 NE 199TH STREET 101 NORTH MIAMI BEACH, FL 33179				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIAZ, GUISELLE 823 NE 199TH STREET SUITE 101 NORTH MIAMI BEACH, FL 33179	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIAZ, GUILLERMO 823 NE 199TH STREET SUITE 101 NORTH MIAMI BEACH, FL 33180	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date _____ Daytime Phone # _____					

ATTACHMENT

A.R.S. & 66024456
ASSOCIATES
INC.

Payroll, Healthcare, Non-Profit,
Individual & Corporate Accounting

July 6, 2005

Division of Corporation
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: G&G Diaz & Associates Inc. Document# P04000041122

Your letter states that you are intending to dissolve the above corporation. Enclosed is a copy of the check stub #1120 and a copy of the cancelled check for the yearly fee of \$150.

Please review and advise.

Very Truly Yours,


Stuart Socol

STUART SOCOL

ANDREW SOCOL C.P.A.

ROBERT SOCOL M.S.T.

20810 WEST DIXIE HIGHWAY, NORTH MIAMI BEACH, FL 33180

EMAIL:ARSASSOCINC@AOL.COM, TEL:305-653-7350, FAX:305-653-5205

ATTACHMENT

66024456

04/01/2005 thru 04/29/2005

#P04000041122

GO DIAZ AND ASSOCIATES, INC.
1118
DATE 4/29/05
PAY TO Hi Q
FOR THW 12.25
TOTAL 12.25
DEPOSIT 12.25
BALANCE 0.00
MICRODOTA
#001118# 60670064324200001545655# 7000001118#

REF#4636888390 PAID 4/04

12.25

GO DIAZ AND ASSOCIATES, INC.
1119
DATE 3/21/05
PAY TO WACHOVIA BANK
FOR 70.88
TOTAL 70.88
DEPOSIT 70.88
BALANCE 0.00
MICRODOTA
#001119# 60670064324200001545655# 7000001119#

REF#3034202921 PAID 4/06

70.88

GO DIAZ AND ASSOCIATES, INC.
1120
DATE 3/21/05
PAY TO Dept of State
FOR FIFT
TOTAL 150.00
DEPOSIT 150.00
BALANCE 0.00
MICRODOTA
#001120# 60670064324200001545655# 7000001120#

REF#1639006241 PAID 4/08

150.00

GO DIAZ AND ASSOCIATES, INC.
1122
DATE 3/21/05
PAY TO Prattville
FOR 100.00
TOTAL 100.00
DEPOSIT 100.00
BALANCE 0.00
MICRODOTA
#001122# 60670064324200001545655# 7000001122#

REF#4637000266 PAID 4/11

100.00

DATE 3-28-05
PAY TO Hi Q Photos
FOR Pictures
TOTAL 12.25
THIS CHECK 12.25
OTHER TRANS +/-
BALANCE
TAX DEDUCTIBLE ☐
CHARITABLE EXCISE

DATE 3/29/05
PAY TO WACHOVIA
FOR 70.88
TOTAL 70.88
THIS CHECK 70.88
OTHER TRANS +/-
BALANCE
TAX DEDUCTIBLE ☐
CHARITABLE EXCISE

DATE 3/21/05
PAY TO Dept of State
FOR 150.00
TOTAL 150.00
THIS CHECK 150.00
OTHER TRANS +/-
BALANCE
TAX DEDUCTIBLE ☐
CHARITABLE EXCISE