


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90348 016 ***150.00

DOCUMENT # P05000036196		
1. Entity Name CYNTHIA DIETZ, INC.		

Principal Place of Business 126 SE 40TH STREET CAPE CORAL, FL 33904	Mailing Address 126 SE 40TH STREET CAPE CORAL, FL 33904
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60029061

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04192006 Chg-P CR2E034 (11/05)

4. FEI Number 20-2476227	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DIETZ, CYNTHIA 126 SE 40TH STREET CAPE CORAL, FL 33904		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.

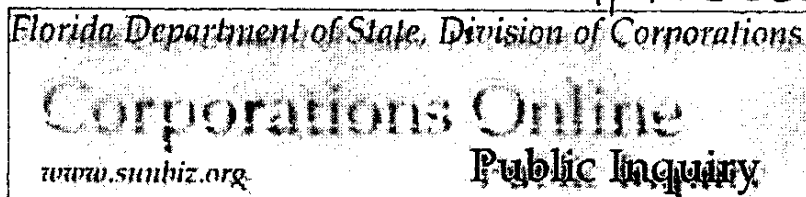
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, S DIETZ, CYNTHIA 126 SE 40TH STREET CAPE CORAL, FL 33904 <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
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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 exemptions contained 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 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: Cynthia A Dietz 4-19-06 239-425-9370
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Florida Profit

CYNTHIA DIETZ, INC.

PRINCIPAL ADDRESS

126 SE 40TH STREET
CAPE CORAL FL 33904

MAILING ADDRESS

126 SE 40TH STREET
CAPE CORAL FL 33904Document Number
P05000036196FEI Number
NONEDate Filed
03/09/2005State
FLStatus
ACTIVEEffective Date
03/09/2005

Registered Agent

Name & Address
DIETZ, CYNTHIA 126 SE 40TH STREET CAPE CORAL FL 33904

Officer/Director Detail

Name & Address	Title
DIETZ, CYNTHIA 126 SE 40TH STREET CAPE CORAL FL 33904	P, S

Annual Reports

Report Year	Filed Date
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ATTACHMENT

60029061

#-P0500036196

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No Events
No Name History Information

Document Images

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03/09/2005 -- Domestic Profit

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