

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042251

FILED
Apr 30, 2008
Secretary of State

Entity Name: DIVERSIFIED INDUSTRIAL TECHNOLOGIES, INC.

Current Principal Place of Business:

408 NORTHEAST 3RD STREET, SUITE 1A
BOYNTON BEACH, FL 33425

New Principal Place of Business:

2729 SW FONDURA RD
PORT ST LUCIE, FL 34953

Current Mailing Address:

408 NORTHEAST 3RD STREET, SUITE 1A
BOYNTON BEACH, FL 33425

New Mailing Address:

2729 SW FONDURA RD
PORT ST LUCIE, FL 34953

FEI Number: 22-3927175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCOIS, DARRELL F
408 NE 3RD STREET
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

FRANCOIS, DARRELL F
2729 SW FONDURA RD
PORT ST LUCIE, FL 34953 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: FRANCOIS, FENOL
Address: 408 NORTHEAST 3RD STREET, SUITE 1A
City-St-Zip: BOYNTON BEACH, FL 33425

Title: DVP () Delete
Name: FRANCOIS, DARRELL F
Address: 120 S ATLANTIC DR E
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DS () Delete
Name: FRANCOIS, MITCHELL
Address: 120 S ATLANTIC DR E
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: FRANCOIS, FENOL
Address: 2729 SW FONDURA RD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: DVP (X) Change () Addition
Name: FRANCOIS, DARRELL F
Address: 2729 SW FONDURA RD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: DS (X) Change () Addition
Name: FRANCOIS, MITCHELL
Address: 3449 SW SAN GIORGIO ST
City-St-Zip: PORT ST LUCIE, FL 34953

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: FENOL FRANCOIS

DPT

04/30/2008

Electronic Signature of Signing Officer or Director

Date