

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P31935

1. Entity Name

DIAMOND DETECTIVE AGENCY, INC.

FILED
Aug 16, 2000 8:00 am
Secretary of State

08-16-2000 90011 003 ***558.75

Principal Place of Business

1651 S HALSTED
CHICAGO HEIGHTS IL 60411
US

Mailing Address

PO BOX 750
CHICAGO HEIGHTS IL 60411
US

2. Principal Place of Business

3. Mailing Address

1651 S Halsted

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Chicago Heights IL

4. FEI Number

36-2697267

Applied For

Not Applicable

Zip

Country

Zip

Country

60411

USA

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ORTIZ, JOHN M
8311 S.W. 142ND AVENUE
APT. 1206
MIAMI FL 33183

Name

John Ortiz

Street Address (P.O. Box Number is Not Acceptable)

888 NW 27th Ave

Suite 250

City

Miami

FL

Zip Code

33125

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.

SIGNATURE

John Ortiz, AREA MANAGER

7/26/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPT
JORDAN, LORETTA L
1651 S HALSTEAD
CHICAGO HEIGHTS IL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVPS
JORDAN, JOHN JR
1651 S HALSTED
CHICAGO HEIGHTS IL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John J. Jordan
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 26, 2000 (708) 754-9884
Date Daytime Phone # X1012

CR2E034 (5/00)