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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Mar 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400094281 (0)

DIAZCO, INC.

Principal Place of Business Mailing Address 1606 SO. CYPRESS ROAD 1806 SO. CYPRESS ROAD POMPANO BEACH FL 33080 POMPANO BEACH FL 33080-9137 3. Date Incorporated or Qualified 3a. Date of Last Report 01/01/1995 05/01/1996 2. Poncipal Place of Business 2a. Mailing Address FEI Number Applied For 26 65-0543672 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zφ Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 💢 No 24 25 29 30 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name DIAZ. GEORGE 569 NW 135TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33325 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607, 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Larn familiar with, and accept the obligations of, Section 607 0505, Florida Statules. SIGNATURE Stignative i typest or prodectivarie of recollect algerit and fille diaponable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 98/6) 13. DELETE Change THE 1.1 TITLE ___ Addition DIAZ. GEORGE NAM: 1.2 NAME 1606 SO. CYPRESS ROAD STEEL ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33060 01b - \$1 - 7d 1.4 CITY - \$7 - ZIP DELETE Change Addition LILL 2.1 TITLE NAME 2.2 NAME STREET ALODRESS 2.3 STREET ADDRESS 0174-53 78 2 4 CITY-ST-ZIP DELETE Addition Change TIME 31 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ACIDRESS. CEN 51-70 3.4 CITY-ST-ZIP DELETE Change Addition TULLE 4.1 TITLE NAME 4. 2 NAME STREET ACOUSTS: 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP DELETE Addition 1/1: 6 5.1 TITLE Change NAME 5.2 NAME 5.3 STREET ADDRESS STREET ACORESS CHY ST ZiP 54 CITY - ST - ZIP 101.5 ___ DELETE 6.1 TITLE Chance Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ACCIDES: 64 CITY-ST-ZIP 14. I do 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 annual report or supplemental annual 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 composition or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name