

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000023284

DIETZ INVESTMENT GROUP, INC.

Principal Place of Business

Mailing Address

1760 S.W. 32ND COURT FT. LAUDERDALE FL 33315 1760 S.W. 32ND COURT FT. LAUDERDALE FL 333

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90214 018 ***150.00



FI. LAUDERDA	LE FL 33315	F1. LAUDEKUALE	FI. LAUDEHUALE FL 33315			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						03/22/1995]	
2. Principal P	lace of Business	2a. Mailing Addr	ess			4. FEI Number	Apr	plied For	
21		26				65-0579971	No	t Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			
City & Stat	te .	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added to		
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year	Intangible		
24	25	29	30		~.	Personal Property Tax.	☐ Yes	□No	
	9. Name and Address of	Current Registered Agent		I_		10. Name and Address of New Register	ed Agent		
				81	Name				
	IZ, SHAUNA	المسيده يحاسب المراسيان المحا		82	Street Addre	ress (P.O. Box Number is Not Acceptable)			
	3 S.W. 32ND COURT				0001711111				
FT. 1	LAUDERDALE FL 33315			83				ļ	
	•			84	City		85 Zip C	Code	
44 Dumana	to the provisions of Continue	607 0502 and 607 1509 Flati	de Statutes, the e	bove	a named corn	oration submits this statement for the purpose	_	registered	
office or r	registered agent, or both, in th	e State of Florida. Such chan	ge was authorized	d by	the corporation	on's board of directors. I hereby accept the ap	pointment as reg	gistered	
agent. I a	m familiar with, and accept th	e obligations of, Section 607.0)505, Florida Stat	utes.	•				
SIGNATURE						d when reinstating) DATE	·	\	
12.	Signature, typed or printed name of regi	ERS AND DIRECTORS	NOTE: Registered	Agen	it signature required	ADDITIONS/CHANGES TO OFFICERS		RS IN 12	
TITLE	PD		ELETE 1.1 TI	ΠĒ		7,001110107011111020 10 011102110	Change	Addition	
NAME	DIETZ, SHAUNA		1.2 N					ł	
STREET ADDRESS					ADDRESS				
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			2.2 N		}			_ }	
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STREET ADDRESS						•	•		
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TITLE	.95		ELETE 6.1 TI	_			☐ Change	Addition	
NAME	1		6.2 N	AME	1			1	

14. 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 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Daytime

Daytime Phone #

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