

2006 FOR PROFIT CORPORATION ANNUAL REPORT


06-20-2006 90013 037 ***150.00
P95000070269

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # P95000070269		
1. Entity Name DIOSARK INC.		

Principal Place of Business 5725 CORPORATE WAY STE. 203 WEST PALM BEACH, FL 33407 US	Mailing Address 5725 CORPORATE WAY STE. 203 WEST PALM BEACH, FL 33407 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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08142006 Chg-P CR2E034 (11/06)

4. FEI Number 65-0627552	Applied For <input type="checkbox"/> 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 WATSON, BERNADETTE 5251 KIM COURT WEST PALM BEACH, FL 33415	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____
Signature is typed or printed name of registered agent and is acceptable. (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW! FEE IS \$350.00 Due by September 8, 2006	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 GAYLE, HAZEL 1825 HILTONIA CIR. W. PALM BCH, FL 33407 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Gayle, Hazel 1795 Pierce Drive Lake Worth, FL 33460 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WATSON, BERNADETTE 5251 KIM CT WEST PALM BEACH, FL 33415 <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	S GRIGGS, MARCIA 12281 152ND ST NORTH JUPITER, FL 33478 <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
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 507, 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: MARCIA GRIGGS 6/13/06 (561) 681-6818
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

66023814

282

DIOSARK INC.

5725 Corporate Way, Ste 203

West Palm Beach, FL 33407

Phone: (561) 681-6818 Fax: (561) 712-0716

August 11, 2006

Florida Department of State

Division of Corporations

PO Box 6327

Tallahassee, FL 32314

Attn: Reinstatement Section

Reference Number: P95000070269

Dear Representative:

This letter is the follow-up to a telephone conversation with one of your representatives, Tyrone Scott

The Division of Corporation was contacted in response to a correspondence that the company received dated June 21, 2006. The contact was made almost a month later because I was out on sick leave.

In June, there was a correspondence from the Annual Reports Section stating that the check for \$150 was received along with a form that was incomplete. Attached is a copy of the letter, dated June 5, which gave us 30 days from the date of the letter to return a completed form. Another officer was authorized to complete the form and mail it to the appropriate address. A copy of the completed form is included.

The information was sent out as stated because the check #8120 for \$150.00 was cleared by the bank on June 21, 2006 which is much less than the 30 days grace period given in the letter. In order for the check to be cashed, the annual report/uniform business report must have been received prior to June 21.

This is a request that the \$400.00 balance that is identified in the correspondence dated June 21, 2006 be waived.

Your cooperation will be greatly appreciated .

Sincerely,



Bernadette Watson
Treasurer.