

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000015605	
1. Entity Name DIVERSIFIED COMMUNICATIONS INTERNATIONAL, INC.	

Principal Place of Business 26270 MIRA WAY BONITA SPRINGS, FL 34134	Mailing Address 26270 MIRA WAY BONITA SPRINGS, FL 34134
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01142004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3435583	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CRAMTON, STAN
26270 MIRA WAY
BONITA SPRINGS, FL 34134**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retreating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CRAMTON, STAN 26270 MIRA WAY BONITA SPRINGS, FL 34134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CRAMTON, EILEEN 26270 MIRA WAY BONITA SPRINGS, FL 34134
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. Eileen Cramton Jan 15, 2004 498-7107
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #