


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 21, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000057532 1. Entity Name DIANA CONSTRUCTION CORPORATION	
---	---

Principal Place of Business 1731 SW 12TH AVE. MIAMI, FL 33129	Mailing Address 1731 SW 12TH AVE. MIAMI, FL 33129
---	---

**DO NOT WRITE IN THIS SPACE**



05142004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0763029	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FERIA-PEREZ, CARIDAD M  
 1731 SW 12TH AVE.  
 MIAMI, FL 33129

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 8, 2004**

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	D PREZ, EUGENIO E 1731 SW 12TH AVE. MIAMI, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERIA-PEREZ, CARIDAD M 1731 SW 12TH AVE. MIAMI, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000161163  
 05/21/04-80003-003 150.00

**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)(b), 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: *Caridad M. Feria Perez* 5-17-04 305-536-6900 x211  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #