

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000074286

FILED
Jan 18, 2004
Secretary of State

Entity Name: DIVERSIFIED SERVICES CORP.

Current Principal Place of Business:

9421 SW 51ST PLACE
COOPER CITY, FL 33320

New Principal Place of Business:

9421 SW 51 PLACE
COOPER CITY, FL 333284107 US

Current Mailing Address:

9421 SW 51ST PLACE
COOPER CITY, FL 33320

New Mailing Address:

9421 SW 51 PLACE
COOPER CITY, FL 333284107 US

FEI Number: 20-0296807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHRAGER, MICHAEL K
9421 SW 51ST PLACE
COOPER CITY, FL 33320 US

Name and Address of New Registered Agent:

SCHRAGER, MICHAEL K
9421 SW 51 PLACE
COOPER CITY, FL 333284107 US

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.

SIGNATURE:

01/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHRAGER, MICHAEL K
Address: 9421 SW 51ST PLACE
City-St-Zip: COOPER CITY, FL 33320

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHRAGER, MICHAEL K
Address: 9421 SW 51 PLACE
City-St-Zip: COOPER CITY, FL 333284107 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL K. SCHRAGER

D

01/18/2004

Electronic Signature of Signing Officer or Director

Date