

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000074964
Entity Name
DIASELLA, INC
Principal Place of Business
Tower of Pizza
81645 Overseas Highway
Islamorada, Fla 33036
Mailing Address
P.O. Box 883
Islamorada, Fla 33036

FILED
Feb 24, 2000 8:00 am
Secretary of State
02-24-2000 90072 002 ***150.00

811998

Principal Place of Business
Tower of Pizza
Suite, Apt. #, etc.
1645 Overseas Highway
City & State
Islamorada, Fla 33036
Zip
33036
Country
Monroe
3. Mailing Address
P.O. Box 883
Suite, Apt. #, etc.
City & State
Islamorada, Fla 33036
Zip
33036
Country
Monroe
4. FEI Number
54-00-040266-08-9
Applied For
Not Applicable
5. Certificate of Status Desired
\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent
Juan C. Quezada
202 Ocean Drive
Key Largo, Florida 33037
7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL
Zip Code

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
Signature, typed or printed name of registered agent and title if applicable.
(NOTE: Registered Agent signature required when reinstating)
DATE
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)
FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State
10. Election Campaign Financing
Trust Fund Contribution.
\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME		TITLE	NAME	
ADDRESS	Juan C. Quezada		STREET ADDRESS		
CITY-ST-ZIP	202 Ocean Drive 33037		CITY-ST-ZIP		
	Key Largo, Florida 33037				
TITLE			TITLE		
ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE		
ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE		
ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE		
ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

3. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowerments.
SIGNATURE: Juan C. Quezada
Date
1/24/00
Daytime Phone #
(305) 664-8246