

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Aug 28, 2000 8:00 am**
Secretary of State

08-28-2000 90032 031 ***150.00

DOCUMENT # P98000024942

1. Entity Name

DIAZ CONSTRUCTION MAINTENANCE SERVICES, INC.

Principal Place of Business

4701 LYONS RD. #226
COCONUT CREEK FL 33073

Mailing Address

4701 LYONS RD. #226
COCONUT CREEK FL 33073

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

DIAZ, ANTONIO
4701 LYONS RD. #226
COCONUT CREEK FL 33073

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00**
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **DIAZ, ANTONIO**
STREET ADDRESS **4701 LYONS RD, #226**
CITY-ST-ZIP **COCONUT CREEK FL 33073**TITLE **D** ☐ Delete
NAME **ZUNIGA, ELI S**
STREET ADDRESS **4701 LYONS RD, #226**
CITY-ST-ZIP **COCONUT CREEK FL 33073**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
D# P9800024912
DW 8/369

August 23, 2000

Division of Corporation
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Sirs;

I am sending this Annual Report late, due to the circumstances that I did not received the first time.

Please be advise that this is the first time that happened and sometimes you miss thing.

Sorry for the inconvenience this may have cause you. Should you have any question concerning the above, do not hesitate to contact me at your best convenience.

Sincerely yours,

Antonio Diaz

Mr. Antonio Diaz
President
7508 NW 44TH COURT #A
Coral Springs, FL 33065