

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90179 034 ***150.00

DOCUMENT # P98000086647

1. Entity Name

GRAN DIA PROPERTIES, INC.

Principal Place of Business

**14529 BRUCE B DOWNS BLVD
TAMPA FL 33613**

Mailing Address

**27908 SUMMER PLACE DR.
WESLEY CHAPEL FL 33543**

2. Principal Place of Business

3. Mailing Address

14529 BRUCE B. DOWNS BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

D

City & State

City & State

TAMPA FL

Zip

Country

Zip

Country

33613

USA

4. FEI Number

59-3542842

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIAZ, ROBERT D

**27908 SUMMER PLACE DR.
WESLEY CHAPEL FL 33543**

Name

DIANE F. DIAZ

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

27908 SUMMER PLACE

City

Wesley Chapel

FL

Zip Code

33543

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

DIANE F. DIAZ

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-20-02

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 \$150.00
After May 1, 2002 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**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **DIAZ, ROBERT D**
STREET ADDRESS **27908 SUMMER PLACE DR.**
CITY-ST-ZIP **WESLEY CHAPEL FL 33543**

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

TITLE **D** ☐ Delete
NAME **DIAZ, DIANE F**
STREET ADDRESS **27908 SUMMER PLACE DR.**
CITY-ST-ZIP **WESLEY CHAPEL FL 33543**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ 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:

DIANE F. DIAZ

4-20-02 (813) 632-3700

Date

Daytime Phone #

CR2E034 (9/01)