

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000093164

1. Entity Name

DIVERSIFIED COMMERCIAL GROUP INC.

R

FILED
Jul 25, 2000 8:00 am
Secretary of State

07-25-2000 90005 004 ***150.00

Principal Place of Business

7309 NW 12TH STREET
MIAMI FL 33126

Mailing Address

7309 NW 12TH STREET
MIAMI FL 33126

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0886497

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GRUSZCZYK, MARTIN M
7309 NW 12TH STREET
MIAMI FL 33126

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

FILE NOW!!! FEE IS \$550.00

After SEPTEMBER 13, 2000 Min. will be \$750.00

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GRUSZCZYK, MARTIN M
7309 NW 12TH STREET
MIAMI FL 33126 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GRUSZCZYK, MARIA P
7309 NW 12TH STREET
MIAMI FL 33126 ☐ Delete

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

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STREET ADDRESS
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CITY-ST-ZIP
☐ Change ☐ Addition

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 title empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

P98000093164

AB069597

Diversified Commercial Group

7309 n.w. 12 st. Miami, Florida 33126

Tel: (305) 594-3149 Fax: (305) 591-3265

DOCUMENT #P98000093164

July 18, 2000

Florida Dept. of State
Division of Corporations
Annual Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

To whom it may concern:

This letter is to inform you that Diversified Commercial Group
Never received the first notice for the 2000 Uniform Business
Report.

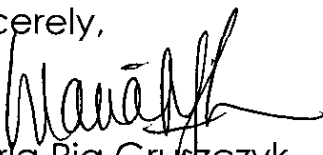
The same thing happened last year and I don't understand
why,

Since you have the correct address on it. Once again I am
asking

If you can waive the late fee of \$400.00 and I am sending you
Check # 9120 for \$150.00.

Thank you for your cooperation in this matter again,

Sincerely,



Maria Pia Gruszczyk
Vice President