2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) P98000099960 **DOCUMENT #** 1. Entity Name



FILED Mar 24, 2003 8:00 am Secretary of State

S&FD	DIVERSIFIED, INC.			********		90242 028 ***	
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	ace of Business	Mailing Address		-			
3256 NW FE	ederal ACH FL 34957	2161 S.E. HARLOW ST.					
DENOEN DE	NOTI FL 34937	PORT ST. LUCIE FL 34	952				
				1		 	6 18 11 0 1 0 11 11 0.0 11 10 11
2. Principal	Place of Business ONW FEDERAL	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City_& Str	ate	City & State					
SENE	SEN BEACH FL	ony a dialo		4.	FEI Number 65-087422	5 -	Applied For Not Applicable
3495	7 Country MARTIN	Zip	Country	5.	Certificate of Status Desired	□ \$8.75 Fee Re	Additional
man and a	6. Name and Address of Current	Registered Agent		7.	Name and Address of New		drillea
IDDALIIM	CAMEED		Name	المراجع الما		- regional regions	
	, SAMEER		Street A		Box Number is Not Acceptable		
	HARLOW ST.		Sileet A	(F.U.	Box Number is Not Acceptable	e)	
PUHI SI	LUCIE FL 34952	•			<u> </u>		
3. °			City			FL Zip	Code
8. The above	e named entity submits this statement fo	r the purpose of changing its	s registered office or	registered a	goot or both in the Ctate of El		
the obliga	tions of registered agent.		- 19,000,00	registered at	gent, or both, in the State of Fi	orida. I am familiar	with, and accept
	Signature, typed or printed name of registered agent a	and title if applicable. (NOT	E: Registered Agent signatu	re required when r	reinstating)	DATE	
SIGNATURE		and title if applicable. (NOT	E: Registered Agent signatu	re required when a	reinstating)	DATE	
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of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information 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 10 or Block 11 if