2006 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P99000019715

1. Entity Name

DIVERSIFIED CONSTRUCTION MANAGERS, INC.



FILED
May 23, 2006 08:00 AM
Secretary of State

Principal Place of Business

555 S OLD WOODWARD AVE

SUITE 1209 BIRMINGHAM, MI 48009 Mailing Address

555 S OLD WOODWARD AVE

SUITE 1209

BIRMINGHAM, MI 48009



05192006

No Chg-P

CR2E034 (11/05)

4. FEI Number

65-0916468

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

YVETTE, MURPHY ESQ 3250 MARY STREET STE 302

COCONUT GROVE, FL 33133

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The above named entity submits this statement for the purp	iose of changing its registered office or registered agent, or t	both, in the State of Florida	I am familiar with, and accept
the abligations of registered agent.	·-	·	•

الإراث

SIGNATURE.

STREET ADDRESS
CATY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CATY-ST-ZIP
TITLE
NAME
STREET ADDRESS
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Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE 13 \$550.00 Due by September 6, 2006 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE NAME MCDANIEL, JACKSON 555 S. OLD WOODWARD, SUITE 1209 STREET ADDRESS CITY-ST-ZIP BIRMINGHAM, MI 48009 VS. TITLE BENSON, GREGORY J NAME 555 S. OLD WOODWARD, SUITE 1209 STREET ADDRESS CITY-ST-ZIP : BIRMINGHAM, MI 48009 MILE NAME STREET ADDRESS CITY-ST-ZIP TITLE

U00000565912 05/23/06~80004~007 550.00

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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment without address, with all other like empowered.

SIGNATURE:

gar (60)

5/19/06

248-593-0778