

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90156 016 ***150.00

DOCUMENT # **P 990000 94005**

1. Entity Name

THE D-Z, Inc



10065000

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1424 Florida Ave

3. Mailing Address

1424 Florida Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PALM HARBOR-Florida

City & State

PALM HARBOR Florida

4. FEI Number

59-3636956

Applied For

Not Applicable

Zip

34683

Country

U.S.A.

Zip

34683

Country

U.S.A.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

MATT Dillon

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

1424 Florida Ave

City

PALM HARBOR

FL

Zip Code
34683

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Matt Dillon

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

President

(NOTE: Registered Agent signature required when reinstating)

April 7-2003

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	MATT Dillon
STREET ADDRESS	1424 Florida Ave
CITY-ST-ZIP	PALM HARBOR-Florida 34683
TITLE	Vice President
NAME	DONNA A BENTINGER
STREET ADDRESS	1610 NEBRASKA AVE
CITY-ST-ZIP	PALM HARBOR - Florida 34683
TITLE	SECRETARY
NAME	PATRICIA DILLON
STREET ADDRESS	1424 Florida Ave
CITY-ST-ZIP	PALM HARBOR - FL 34683
TITLE	TREASURER
NAME	Deborah Dillon-Sarra
STREET ADDRESS	1617-Georgia Ave
CITY-ST-ZIP	PALM HARBOR - Florida 34683
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE

Matt Dillon

MATT Dillon - president

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 7-2003-813-917-0001

Date

Daytime Phone #

CR2E034B (12/02)