

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S46348

Entity Name: DIAZ ENTERPRISES, INC.

FILED  
Apr 02, 2005  
Secretary of State

## Current Principal Place of Business:

6274 SW 192 AVENUE  
FORT LAUDERDALE, FL 33332

## New Principal Place of Business:

10049 SW 42ND AVE  
OCALA, FL 34476

## Current Mailing Address:

6274 SW 192 AVENUE  
FORT LAUDERDALE, FL 33332

## New Mailing Address:

P.O. BOX 770802  
OCALA, FL 34477

FEI Number: 65-0261847

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DIAZ, MIGUEL  
6274 SW 192 AVENUE  
FORT LAUDERDALE, FL 33332 US

## Name and Address of New Registered Agent:

DIAZ, MIGUEL  
P.O. BOX 770802  
OCALA, FL 34477 US

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: MIGUEL DIAZ

04/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DIAZ, MIGUEL,  
Address: 6274 SW 192 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33332

Title: SVD ( ) Delete  
Name: DIAZ, ANNETTE,  
Address: 6274 SW 192 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33332

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DIAZ, MIGUEL,  
Address: P.O. BOX 770802  
City-St-Zip: OCALA, FL 34477

Title: SVD (X) Change ( ) Addition  
Name: DIAZ, ANNETTE,  
Address: P.O. BOX 770802  
City-St-Zip: OCALA, FL 34477

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIGUEL DIAZ

PD

04/02/2005

Electronic Signature of Signing Officer or Director

Date