I hereby certify that the information indicated on this report or supplemental report is true a oath; that I am an officer or director of the corporation or the receiver or trustee empowered		
above, or on an attachment with all other like empowered.	······································	, , , , , , , , , , , , , , , , , , ,
SIGNATURE: ANA M DIAZ	PSD	04/29/2013

# SIGNATURE: ANA M DIAZ

Electronic Signature of Signing Officer/Director Detail

11473 SW 29 STREET MIAMI, FL 33165

Entity Name: MANUEL DIAZ MANUFACTURERS' REPRESENTATIVE INC

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### **Current Mailing Address:**

**Current Principal Place of Business:** 

11473 SW 29 STREET MIAMI. FL 33165

DOCUMENT# L03857

## FEI Number: 65-0132560

#### Name and Address of Current Registered Agent:

DIAZ, ANA M 11473 S.W. 29TH ST. MIAMI, FL 33165 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:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	PSD	Title	TD
Name	DIAZ, ANA M	Name	DIAZ, CARIDAD
Address	11473 S.W. 29TH ST.	Address	11473 S.W. 29TH ST.
City-State-Zip:	MIAMI FL	City-State-Zip:	MIAMI FL

Certificate of Status Desired: Yes

# CC5956498183

Date

FILED Apr 29, 2013

Secretary of State

Date