FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 22 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V36694 DIAMOND RACING, INC. Principal Place of Business Mailing Address 10145 NW 46TH ST 10145 NW 46TH ST SUNRISE FL 33351 SUNRISE FL 33351 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/13/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 10145 NWYLE Street 10145 NW46 Street 65-0419601 Not Applicable 26 Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 DUNCIS: 8. This corporation owes or has paid the current year Intangible mward Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent KIMLER, LEWIS S 6950 CYPRESS RD Street Address (P.O. Box Number is Not Acceptable) **SUITE 209** 63 PLANTATION FL 33317 84 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of regesti rest agent and title if applicable (NOTE: Rug stored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1 1 TITLE TITLE **ELLIOTT, PIERCE** 1.2 NAME NAME 10145 NW 46TH ST STREET ADDRESS 1.3 STREET ADDRESS **SUNRISE FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2 1 1116 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELFTE Change ■ Addition 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELFTE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS GITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition ☐ DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - Z(P

14. 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 annual report or supplemental annual 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.1 THILE

6.2 NAME

6.3 STREET ADDRESS

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

0000

4-15.98

Change

Addition