## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

⊅ PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 511768

1. Corporation Name

## Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90093 026 \*\*\*150.00

BUY-DIR	RECT DIAMOND CO., INC.								
Principal Plac	e of Business	Mailing Address				-1 1 (40) All All All State (40) State State (40)	18(6 B1\$11 B19)	14 MINII M(M() 1991	
14 NE 1ST AVE SUITE 1105 14 NE 1ST AVE SUITE 110 MIAMI FL 33132 MIAMI FL 33132			105						
				·		DO NOT WRITE IN THIS			
	•					3. Date Incorporated or Qualifed			
•	· · ·					09/03/1976 4. FEI Number		Applied For	
·	lace of Business	2a. Mailing Address				1	$\vdash$	Applied For Not Applicable	
Suite, Apt.	# ata	Suite Ant # etc	Suite, Apt. #, etc.			59-1705848		Additional	
22	#, 610.	_	· ·			_5Certifcate of Status Desired		Required	
City & Stat	le	City & State				6. Election Campaign Financing	\$5.0	0 May Be	
23		28				Trust Fund Contribution		d to Fees	
Zip <sub>.</sub>	Country	Zip	Col	untry		8. This corporation owes the current year Int		F77	
24	25	29	30			Personal Property Tax.	Yes	No	
	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New Registered	Agent		
un.	ANCEL A			"	Name				
HO, ANGELA 14 N.E. 1ST AVE., SUITE 1105				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	MI FL 33132	•		83			<del></del>		
,									
		•		84	City	FL	85 Zi	p Code	
11 Pursuant	to the provisions of Sections 607.050	22 and 607.1508. Florida Statut	es, the a	above	-named corpo	vertion submits this statement for the purpose of	changing i	ts registered	
l office or r	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a	uthorize	d by t	he corporation	n's board of directors. I hereby accept the appoi	ntment as	registered	
	in familiar with, and accept the obliga	ations of, Decision Cor. 0000, Fig	ilida Qtai	totes.					
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE	: Registere	d Agent	signature required				
12,		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECT		
TITLE	PD	☐ DELETE	1.1 T				chang	# Madiabil	
NAME	HO, ANGELA			AME				i	
STREET ADDRESS		•			ADORESS			Ì	
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NAME	RITZER, EVE		-		ADDDEEC				
STREET ADDRESS	1901 BRICKELL AVE								
CITY-ST-ZIP	MIAMI FL.	5 · · · · · · · · · · · · · · · · · · ·		TREET.	-	e en v	•		
NAME .	1	DELETE		CITY-S1	-	er general de la companya de la comp	☐ Chang	e Addition	
STREET ADDRESS		☐ DELETE	2.40	CITY- <u>S</u> 1 TTLE	-	* <u>* * * * * * * * * * * * * * * * * * </u>	Chang	e Addition	
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NAME	\$V		2.40 3.1 T 3.2 N 3.3 S 3.4.0	CITY-ST TTLE LAME STREET	ADDRESS	* *** *** *** *** *** *** *** *** ***			
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CITY-ST-ZIP 1575 (559) 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charges or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR