

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 589812

(7)

1. Corporation Name

DIANA'S, INC.



Principal Place of Business

1033 KANE CONCOURSE
BAY HARBOR FL 33154
US

Mailing Address

1033 KANE CONCOURSE
BAY HARBOR FL 33154
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

SRETER, ABRAHAM
2703 N W 5TH AVE
MIAMI FL 33127

3. Date incorporated or Qualified

10/19/1978

3a. Date of Last Report

04/11/1995

4. FEI Number

59-1855027

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

ABRAHAM SRETER

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

83 1033 KANE CONCOURSE

84 City

BAY HARBOR

FL

85 Zip Code

33154

11. Pursuant to the provisions of Sections 607.01(2) and 607.01(3)(b), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office (or principal office, or both, in the State of Florida) to the address indicated by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, being a registered agent, Florida Statutes.

SIGNATURE

ABRAHAM SRETER

President

12. OFFICERS AND DIRECTORS

1. TITLE

DP

☐ DELETE

2. NAME

SRETER, ABRAHAM
1033 KANE CONCOURSE
BAY HARBOR FL

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

SIGNATURE: *ABRAHAM SRETER*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ABRAHAM SRETER 3/6/96 305-566-1700

CR2E034 (12/95)