

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAR -7 AM 9:07

DOCUMENT # 597235 (1)

1. Corporation Name

DIVERSIFIED VENTURES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

3500 S.W. 14TH ST.
DEERFIELD BEACH FL 33442

Mailing Address

3500 S.W. 14TH ST.
DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/13/1978

3a. Date of Last Report

02/21/1994

4. FBI Number

59-1583102

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PERRY, GERARD
3500 S.W. 14TH ST.
DEERFIELD BEACH FL 33064

81 Name

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

83

84 City

FL

85 Zip Code

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, Name, Title, and Address of Registered Agent

(NOTE: Registered Agent Signature required when registering)

3/2/95

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	KENNEDY, ROBERT
STREET ADDRESS	4411 NE 31ST AVENUE
CITY - ST - ZIP	LIGHTHOUSE PT. FL
TITLE	V
NAME	WOONTON, ROGER
STREET ADDRESS	1100 SW 19TH AVENUE
CITY - ST - ZIP	BOCA RATON FL
TITLE	S
NAME	PERRY, GERARD
STREET ADDRESS	3500 SW 14TH ST.
CITY - ST - ZIP	DEERFIELD BCH. FL
TITLE	T
NAME	BRYANT, JIM
STREET ADDRESS	988 HYACINTH DR
CITY - ST - ZIP	DELRAY BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jim Bryant Treasurer

3/2/95

305

421-1700