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

PROFIT CORPORATION ANNUAL REPORT 1999



DOCUMENT # 635323 1. Corporation Name

DIVERSE MARKETS, INC.

VE LEK	MAY 151 IS \$550.00	FILED		
	FLORIDA DEPARTMENT OF STATE Katherine Harris	Mar 22, 1999 8:00 am		
	Secretary of State	Secretary of State		
T ST	DIVISION OF CORPORATIONS	03-22-1999 90091 043 ***150.00		



<u> </u>				<u> </u>	AK EKKI BIBLI ELI	
Principal Place of Business	Mailing Address			The state of the s	E. G. G. G. G. G.	20 4000
5044 N.E. 12TH AVE. BOX 23417. (FT. LAUDERDALE, FL. 33307) FT. LAUDERDALE FL 33334	5044 N.E. 12TH AVE. BOX 23417. (FT. LAUDERDA FT. LAUDERDALE FL 33334	LE. FL 3	3307)	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
				09/06/1979		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	App	lied For
21	26	-		59-1956699	<u> </u>	Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			• _	\$8.75 A	
22	27			5. Certifcate of Status Desired	Fee Req	luired
City & State	City & State			6. Election Campaign Financing	\$5.00 k	vlay Be
	28			Trust Fund Contribution	Added to	Fees
Zip Country	Zip			8. This corporation owes the current year Intangible		
24 25		30		Personal Property Tax.		□No
9. Name and Address of Curre	nt Registered Agent	8	1 Name	10. Name and Address of New Registered	Agent	
MISUNAS, MICHAEL J.		"	Ivairie			
5044 N.E. 12TH AVE.		8:	2 Street Add	ress (P.O. Box Number is Not Acceptable)		[
FT. LAUDERDALE FL 33334		8	3			
		L				
		8	4 City	FI	85 Zip C	ode
44 Purcuant to the provining of Sections 607.05	02 and 607 1508 Florida Statute	s the abo	ve-named corr	poration submits this statement for the purpose of	changing its r	registered
11. Pursuant to the provisions of Sections 607.05 office or register agent, or both, in the State agent. I am from and a cept the oblic	e of Florida. Such change was au attended Section 607.0505, Flor	thorized b ida Statute	y the corporations.	on's board of directors. I hereby accept the appoin	ntment as reg	istered
SIGNATURE	3 - 3 - 4 - 4 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5			ed when reinstating) DATE	<u>196895.</u>	
	ND DIRECTORS	13.	ent alguatura zortum	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	RS IN 12
TITLE PSD	DELETE	1.1 TITLE			☐ Change	Addition
NAME MISUNAS, MICHAEL J.		1.2 NAME	<u> </u>			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
STREET ADDRESS 5044 NE 12TH AVENUE		1.3 STRE	ET ADDRESS			ÌÈ
CITY-ST-ZIP FT. LAUDERDALE FL		1.4 CITY-	ST-ZIP	<u></u>		ស
TITLE	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME		2.2 NAME	፤			}
STREET ADDRESS		2.3 STRE	ET ADDRESS	en e		
CITY-ST-ZIP		2.4 CITY	-ST-ZIP			
TITLE	☐ DELETE	3.1 TITLE	:]	· ·	Change	☐ Addition
NAME		3.2 NAME	■			
STREET ADDRESS		3.3 STRE	ET ADDRESS			
CITY-ST-ZIP		3.4, C/TY	-ST-ZIP	<u> </u>	F7.6	
TITLE	☐ DELETE	4.1 TITLE	•		Change	☐ Addition
NAME		4. 2 NAM		•		
STREET ADDRESS		4.3 STRE	ET ADDRESS			1
CITY-ST-ZIP	□ priest	4.4 CITY-			☐ Change	Addition
TILE	☐ DELETE	5.1 TITLE 5.2 NAME	I			
NAME		ı	ET ADDRESS	•		,
STREET AODRESS	·	5.4 CITY-	1		•	
CITY-ST-ZIP	□ DELETE	6.1 TITLE			☐ Change	Addition
NAME		6.2 NAME				
,		i i	ET ADDRESS			
STREET ADDRESS		6.4 CITY		·		}

14. I hereby certify that the information supplied with this filling 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 changed on an attachment with an address, with all other like empowered.

SIGNATURE: