


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State

01-20-2004 90065 023 ***150.00

DOCUMENT # J14809 1. Entity Name BARRY DIAMOND, P.A.			
Principal Place of Business 2650 S.W. 27TH AVE. SUITE 302 MIAMI, FL 33133 US		Mailing Address 2650 S.W. 27TH AVENUE SUITE 302 MIAMI, FL 33133 US	
2. Principal Place of Business 6460 Chapman Field Drive Suite, Apt. #, etc.		3. Mailing Address 6460 Chapman Field Drive Suite, Apt. #, etc.	
City & State Miami, FL		City & State Miami, FL	
Zip 33156		Zip 33156	
Country US		Country US	
4. FEI Number 59-2682879		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DIAMOND, BARRY 6460 CHAPMAN FIELD DRIVE MIAMI, FL 33156		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>Barry Diamond</i></u> (NOTE: Registered Agent signature required when reconstituting) DATE: <u><i>Jan 13, 2004</i></u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DIAMOND, BARRY 6460 CHAPMAN FIELD DR. MIAMI, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.			
SIGNATURE: <u><i>Barry Diamond</i></u> <small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u><i>1/13/04 (305)661-1946</i></u> <small>Date Daytime Phone #</small>	