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CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 PM 2:16

DOCUMENT # J53458

(2)

1. Corporation Name

DIVERSE INVESTMENTS, INC.

Principal Place of Business

C/O BRADFORD R. GEISEN
21 VIA DE CASAS SUR #203
BOYNTON BCH FL 33426

Mailing Address

199 W. PALMETTO PARK ROAD
2
BOCA RATON FL 33432
US

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21 2505 NW Boca Raton Blvd

2a. Mailing Address

26 2505 NW Boca Raton Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Boca Raton, FL

27 City & State

28 Boca Raton, FL

Zip

Country

24 33431

25 Palm Beach

Zip

Country

29 33431

30 Palm Bch

9. Name and Address of Current Registered Agent

GEISEN, BRADFORD R
311 S. COUNTRY CLUB BLVD.
BOCA RATON FL 33487

3. Date incorporated or Qualified

01/23/1987

3a. Date of Last Report

01/31/1994

4. FEI Number

65-0066766

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

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, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTS
GEISEN, BRADFORD R
311 S. COUNTRY CLUB BLVD.
BOCA RATON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
MUTILLO, DOMINIC A.
541 NW 54 ST
BOCA RATON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
SULLIVAN, GREGORY M
498 NE 9TH STREET
BOCA RATON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/95

Date

407-392-2333

Typed Name