FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAR 22 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L01745 (3)

1. Corporation Name
DIANE LEWIS INC.

Principal Place of Business	Mailing Address
% DIANE LEWIS ~~992 WOODSHIRE LANE STE. #312~~ ~~NAPLES FL 33999~~	% DIANE LEWIS ~~992 WOODSHIRE LANE STE. #312~~ ~~NAPLES FL 33999~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/12/1989
3a. Date of Last Report: 03/28/1994

2. Principal Place of Business	2a. Mailing Address
21 1617 FIG LANE	26 1617 FIG LANE
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: NAPLES, FL	28 City & State: NAPLES, FL
24 Zip: 33942 25 Country: Collier	29 Zip: 33942 30 Country: Collier

4. FEI Number: 65-0136173 ☐ 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

9. Name and Address of Current Registered Agent

DIANE LEWIS
~~922 WOODSHIRE LANE~~
~~312 NAPLE FLA~~
~~NAPLES FL 33999~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 1617 FIG LANE
83
84 City: NAPLES FL 85 Zip Code: 33942

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	☒ Change ☐ Addition
NAME	LEWIS, DIANE	1.2 NAME	
STREET ADDRESS	~~992 WOODSHIRE LANE~~	1.3 STREET ADDRESS	1617 FIG LANE
CITY-ST-ZIP	~~NAPLES FL~~	1.4 CITY-ST-ZIP	NAPLES, FL 33942
TITLE	T	2.1 TITLE	☒ Change ☐ Addition
NAME	LEWIS, DIANE	2.2 NAME	
STREET ADDRESS	~~992 WOODSHIRE LN #312~~	2.3 STREET ADDRESS	1617 FIG LANE
CITY-ST-ZIP	~~NAPLES FL 33942~~	2.4 CITY-ST-ZIP	NAPLES, FL 33942
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify as 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, or on an attachment with an address.

SIGNATURE: Diane Lewis 3-15-95 (813) 263-9410
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OR OFFICER OR DIRECTOR — Date — Daytime Phone #
Diane Lewis