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

STREET ADDRESS

14. I hereby certify that the informa indicated on this annual report officer or director of the corporation.

Block 12 or Block 13 If ch

CIGNATURE.

CITY-ST-ZIP

FILED Jan 29 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L38530 (6)DIAMONDS BY TERRY, INC. Principal Place of Business Mailing Address 3868 S.E. DIXIE HWY 3868 S.E. DIXIE HWY STUART FL 34997 STUART FL 34997 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1990 2, Principal Place of Business Mailing Address 4. FEI Number Applied For 59-2985797 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 FREDERICK RIEGER RECORLICK UTTEGEN 4275 84TH ST., SOUTH, SUITE 176 Bom A 82 ST PETERSBURG FL 33711 63 84 Cit 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change RIEGER, FREDERICK O. NAME 1.2 NAME 3868 S.E. DIXIE HWY STREET ADDRESS 1.3 STREET ADDRESS STUART FL CITY-ST-ZIP 1.4 CITY - ST - ZIP סוק DELETE Change Addition TITLE 2.1 TITLE RIEGER, LINDA M. NAME 2.2 NAME 3868 S.E. DIXOE HWY STREET ADDRESS 2.3 STREET ADDRESS STUART FL CITY-\$T-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ___ Change ■ Addition NAME 6.2 NAME

6.3 STREET ADDRESS

nent with an address.

In this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

1/21/28

561-781-1133

upplemental 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 for the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in