PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M24409

1. Corporation Name

DIAMOND TELE-VIDEO PRODUCTIONS, INC.

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90040 044 ***150.00



Principal Place	e of Business	Mailing Address			1 199198 110 11911 81811 81811 88110 II			
14202 SW 136 ST. 14202 SW 136 ST.								
MIAMI FL 33186	3-5863	MIAMI FL 33186-5863			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					12/10/1985		·	
2. Principal Pl	ace of Business	2a. Mailing Address	0		4. FEI Number	•	_ 	olied For
21 794L	SW 139 CT	26 7940 SW 13	40		59-2621983			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	J 	\$8.75 A Fee Red	quired
City & State City & State 28 M/4M/			el		6. Election Campaign Financing Trust Fund Contribution	<u> </u>	\$5.00 r	•
Zip 331 &	Country A	^{Zip} 29 33(83 30	Coui	ΰsA	This corporation owes the current Personal Property Tax.			
<u> </u>	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	stered Age	ent	
Dist	AOND DODEDT C		Ţ	81 Name				
DIAMOND, ROBERT F.				82 Street Add	ress (P.O. Box Number is Not Acceptable)		
14202 SW 136 ST								
MIAN	/II FL 33186			83	_			
				84 City		7 -1	85 Zip C	ode
				ـــــ		FL	naging its	registered
11. Pursuant office or reagent. I as	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida Statutes. of Florida. Such change was auto ons of, Section 667.0505, Florida	the all orized	by the comparation test.	poration submits this statement for the pur on's board of directors. I hereby accept the	e appointm	ient as reg	jistered
SIGNATURE	Robert F. Damon	71			1/2	2/49		
	Signature, typed or printed name of registered agent			Agent signature require	ed when reinstating)	DALE ,	DIDECTO	DC IN 12
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		Change	Addition
TITLE	. - '	DELETE	1.2 NA	,	•	_		
NAME	DIAMOND, ROBERT F 7940 SW 139 CT.			REET ADDRESS				
STREET ADDRESS	MIAMI FL			TY-ST-ZIP				
CITY-ST-ZIP	DS	☐ DELETE	2.1 TIT				Change	Addition
TITLE	DIAMOND, DEBBIE		2.2 NA	i				}
NAME STREET ADDRESS	7940 SW 139 CT.			REET ADDRESS	•			
	MIAMI FL			TY-ST-ZIP				
CITY-ST-ZIP TITLE	HIII/WIII I C	☐ DELETE	3.1 TIT				_ Change	Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET ADDRESS				}
CITY-ST-ZIP			3.4. CF	TY-ST-ZIP				
TITLE		☐ DELETE	4.1 TIT				Change	Addition
NAME			4. 2 N	AME				1
STREET ADDRESS			4.3 ST	REET ADDRESS				1
CITY-ST-ZIP			44 CT	TY-ST-ZIP				
TITLE		☐ DELETE	5.1 TR				Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET ADDRESS				}
CITY-ST-ZIP			5.4 CI	TY-ST-ZIP				
TITLE		☐ DELETE	6.1 TIT	ILE			☐ Change	☐ Addition
NAME			62 NA	ME				· 1
STREET ADDRESS			6.3 ST	REET ADDRESS				
		^						

14. 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 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 this 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 annual report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attractment with an address, with all other like empowered.

SIGNATURE:

TRE AND YPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

22/99 305-233-2049 Date Deputing Phone # CR2E034 (11/98)