2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000002460

Entity Name: DIGA DIVE CLUB, INC.

FILED Jan 08, 2003 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
13339 SW : APT 2 MIAMI, FL :	112 TERRACE 33186			
Current Mailing Address:		New Mailing Address:		
13339 SW : APT 2 MIAMI, FL :	112 TERRACE 33186			
FEI Number:	FEI Number Applied For ()	FEI Number Not Appl	icable (X) Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and	Address of New Registered Agent:	
HOYT, KAT 13339 SW APT 2 MIAMI, FL	112 TERRACE			
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.				
SIGNATURE:				
	Electronic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete LENHARDT, DONNA 9490 SW 188 STREET MIAMI, FL 33157	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition BROOKS, KELLY S 9855 S.W. 138 STREET MIAMI, FL 33176	
Title: Name: Address: City-St-Zip:	VPD () Delete MANNING, WAYNE 5001 HAMMOCK LAKE DRIVE MIAMI, FL 33156	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition SHEPARD, JOHN 351 S.W. 5 STREET FLORIDA CITY, FL 33034	
Title: Name: Address: City-St-Zip:	SD () Delete SAENZ, CLEMENTINA 1040 NW 127 CT MIAMI, FL 33182	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition COLOMBO, BRENDA 7761 S.W. 180 TERRACE MIAMI, FL 33157	
Title: Name: Address: City-St-Zip:	TD () Delete COX, CAROL 6240 SW 69 AVENUE MIAMI, FL 33143	Title: Name: Address: City-St-Zip:	TD (X) Change () Addition COLOMBO, RICHARD 7761 S.W. 180 TERRACE MIAMI, FL 33157	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition HOYT, KATHY L 13339 S.W. 112 TERRACE, APT. 2 MIAMI, FL 33186	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHY L. HOYT D 01/08/2003