


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000020191</b>	
<b>1. Entity Name</b> <b>RUTH DIAMOND TRAVEL, INC.</b>	

<b>Principal Place of Business</b> <b>6159 HEATHER ST.</b> <b>JUPITER FL 33458</b>	<b>Mailing Address</b> <b>6159 HEATHER ST.</b> <b>JUPITER FL 33458</b>
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<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/05)

**4. FEI Number** **65-1008479** ☐ Applied For ☐ Not Applied

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**HAP, JEFFREY**  
**341 WEST INDIANTOWN RD.**  
**JUPITER FL 33458**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_

City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

**8. 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. I am familiar with, and accept, the obligations of registered agent.**

**SIGNATURE** \_\_\_\_\_ Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** **\$5.00 May E**  
**Trust Fund Contribution.** ☐ **Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> <b>PT</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>NAME</b> <b>DIAMOND, RUTH</b>		<b>STREET ADDRESS</b> <b>04/20/06-80040-017 150.00</b>	
<b>STREET ADDRESS</b> <b>6159 HEATHER STREET</b>		<b>CITY - ST - ZIP</b>	
<b>CITY - ST - ZIP</b> <b>JUPITER FL 33458</b>			
<b>TITLE</b> <b>VPS</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>NAME</b> <b>SCHNEIDER, HOWARD</b>		<b>STREET ADDRESS</b>	
<b>STREET ADDRESS</b> <b>150 FAST TALL OAK CIRCLE</b>		<b>CITY - ST - ZIP</b>	
<b>CITY - ST - ZIP</b> <b>PALM BEACH GARDENS FL 33410</b>			
<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>		<b>CITY - ST - ZIP</b>	
<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>		<b>CITY - ST - ZIP</b>	
<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>		<b>CITY - ST - ZIP</b>	
<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b>	<input type="checkbox"/> Change <input type="checkbox"/> Add
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>		<b>CITY - ST - ZIP</b>	

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** Ruth Diamond **4-3-06 561 624-5985**