FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State
04-21-2003 90336 031 ***158.75

DOCUMENT # P00000041248

1. Entity Name

WHITFIELD ACQUISITIONS, INC.

90097220

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1517 EAST 7TH AVE	1517 EAST 7TH AVE
Suite, Apt. #, etc.: SUITE F	Suite, Apt. #, etc.: SUITE F
City & State: TAMPA, FLORIDA	City & State: TAMPA, FLORIDA
Zip: 33605 Country: USA	Zip: 33605 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3714791 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: JULIO C. ESQUIVEL

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

101 EAST KENNEDY BLVD., SUITE 2800

City: TAMPA FL Zip Code: 33602

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 _____ DATE 4/15/03

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	D	TITLE	
NAME	ROBERT MOREYRA	NAME	
STREET ADDRESS	1517 EAST 7TH AVE, SUITE F	STREET ADDRESS	
CITY-ST-ZIP	TAMPA, FLORIDA 33605	CITY-ST-ZIP	
TITLE	D/P	TITLE	
NAME	RICHARD DIAMOND	NAME	
STREET ADDRESS	1517 EAST 7TH AVE., SUITE F	STREET ADDRESS	
CITY-ST-ZIP	TAMPA, FLORIDA 33605	CITY-ST-ZIP	
TITLE	CEO	TITLE	
NAME	JERRY DIAMOND	NAME	
STREET ADDRESS	1517 EAST 7TH AVE., SUITE F	STREET ADDRESS	
CITY-ST-ZIP	TAMPA, FLORIDA 33605	CITY-ST-ZIP	
TITLE	S/T/CFO	TITLE	
NAME	BRAD GORDON	NAME	
STREET ADDRESS	1517 EAST 7TH AVE., SUITE F	STREET ADDRESS	
CITY-ST-ZIP	TAMPA, FLORIDA 33605	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

12. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ RICHARD DIAMOND, PRESIDENT 4/11/03 813.248.4555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #