

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90013 010 ***150.00

DOCUMENT # P00000064655

1. Entity Name
DIAMOND 706 GROUP, INC.

Principal Place of Business

~~401 OCEAN DRIVE #406~~
MIAMI BEACH FL 33139

Mailing Address

~~401 OCEAN DRIVE #406~~
MIAMI BEACH FL 33139

2. Principal Place of Business

767 ARTHUR GODFREY ROAD
 Suite, Apt. #, etc.

3. Mailing Address

767 ARTHUR GODFREY ROAD
 Suite, Apt. #, etc.

City & State

MIAMI BEACH, FLA

City & State

MIAMI BEACH, FLA

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip
33140

Country
USA

Zip
33140

Country
USA

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YAFFE, ROBERT H ESQ.
767 ARTHUR GODFREY
MIAMI BEACH FL 33140-3413

Name **PAUL B. STEINBERG**
 Street Address (P.O. Box Number is Not Acceptable)

767 ARTHUR GODFREY ROAD
 City **MIAMI BEACH** **FL** Zip Code **33140**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/10/01

9. This corporation is eligible to satisfy its Intangible Tax filing Requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
AFTER MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Delete
 NAME **GRATEROL, MARIA HERMINIA**
 STREET ADDRESS **401 OCEAN DRIVE #406**
 CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **VP** ☒ Change ☐ Addition
 NAME **GRATEROL, MARIA HERMINIA**
 STREET ADDRESS **401 OCEAN DRIVE #46**
 CITY-ST-ZIP **MIAMI BEACH, FLA 33139**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **PD** ☐ Change ☒ Addition
 NAME **GRATEROL, EDUARDO**
 STREET ADDRESS **4779 COLLINS AVENUE APT 1506**
 CITY-ST-ZIP **MIAMI BEACH, FL 33140**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/01

Date

(305) 5382344

Daytime Phone #

CR2E034 (10/00)