FILED
May 03, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000064669

1. Entity Name
DIAMOND 1506 GROUP, INC

Principal Place of Business	Mailing Address
767 ARTHUR GODFREY ROAD MIAMI, FL 33140 US	767 ARTHUR GODFREY ROAD MIAMI, FL 33140 US

DO NOT WRITE IN THIS SPACE

04232004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1092686 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

STEINBERG, PAUL B
767 ARTHUR GODFREY ROAD
MIAMI BEACH, FL 33140-3413

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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 ______

FILE NOW!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	GRATEROL, MARIA HERMINIA
STREET ADDRESS	401 OCEAN DRIVE APT 406
CITY-ST-ZIP	MIAMI BEACH, FL 33139
TITLE	PD
NAME	GRATEROL, EDUARDO
STREET ADDRESS	4779 COLINS AVENUE APT 1506
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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

SIGNATURE: MARIA H. GRATEROL [signature] 4/26/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #