

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90322 026 ***150.00

DOCUMENT # P00000066315

1. Entity Name

Diamond Dolphin Club Corporation

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Urb. Bahia de Marbella

Suite, Apt. #, etc.

Casa Alborada 2

City & State

29600 Marbella

Zip

Country

Malaga-Marbella

Spain

3. Mailing Address

2801 Ponce de Leon Blvd.

Suite, Apt. #, etc.

1155

City & State

Coral Gables, FL

Zip

Country

33134

USA

4. FEI Number

65-1022638

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

John T. Prah1

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

2801 Ponce de Leon Blvd. #1155

City

Coral Gables

FL

Zip Code

33134

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

John T. Prah1

(Signature typed or printed name of registered agent and title is acceptable.)

(NOTE: Registered Agent signature required when re-registering.)

4/02/02

DATE

9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D, P, S, T Rene Rasmussen Urb. Bahia de Marbella
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Casa Alborada 2 29600 Marbella Malaga - Marbella Spain
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

freed

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/02/2002

DATE

Daytime Phone #

CR2E034B (12/01)