

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000070775

Entity Name: DIVERATERS.COM, INC.

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Current Principal Place of Business:

2501 S OCEAN DR, APT 1608
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

2501 S OCEAN DR, APT 1608
HOLLYWOOD, FL 33019

New Mailing Address:

FEI Number: 65-1027570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARR, ROBERT D
2501 S OCEAN DR, APT 1608
HOLLYWOOD, FL 33019

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARR, ROBERT D
Address: 2501 S OCEAN DR, APT 1608
City-St-Zip: HOLLYWOOD, FL 33019

Title: V () Delete
Name: REINOSO-HAHN, HEIDI
Address: 922 LINCOLN ST
City-St-Zip: HOLLYWOOD, FL 33019

Title: VS () Delete
Name: WILES, JOHN H JR
Address: 920 NW 110TH AVE
City-St-Zip: PLANTATION, FL 33324

Title: VT () Delete
Name: RUSS, JOSEPH
Address: 131 SW 117TH AVE, #104
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT D. BARR

P

04/26/2002

Electronic Signature of Signing Officer or Director

Date