FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000069890 (0)

DADDY'S DIVERSION, INC.

													 	
Principal Place of Business Mailing Address										(100):00: (10)0:00 (11() 00()) 99:(1 00)	. 24110 0111	A 18221 1219	10111 001	11 14 11
7015 BERACASA WAY				7015 BERACASA WAY										
BUITE 204 BOCA RATON FL 33433				SUITE 204										
BUCA RATUN	FL 33433			BOC	A RATON FL 33433-	3453					· -			
-									- 1	3. Date Incorporated or Qualified		ate of Las	•	ort
				44.44						10/07/1993 08/05/1996			-· · ·· · · · · · · · · · · · · · · · ·	
2. Principal Place of Business				2a, Mailing Address					1	4. FEI Number Applied For				
21				26						65-0448900 Not Applicable				
Sulte, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired	Γ	•	5 Addi	
22				27						6. Constitute of olatos position		Fee	Requi	red
City & State				City & State						6. Election Campaign Financing \$5.00 May Be				
23				28						Trust Fund Contribution				
Zip Country			: L	Zip Country				/		8. This corporation has liability for intangible tax under s. 199.032,				
24	[25]			29 30					Florida Statutes					
			urrent Re	Registered Agent				T	10. Name and Address of New Registered Agent					
WAL	.ser, tho	MAS C., ESQ.	:				81	Name						
7015 BERACASA WAY Suite 201			!				82	Street /	Addros	ress (P.O. Box Number is Not Acceptable)				
			:				02	3110017	-tuures	ss (1.0. box Number is Not Acceptab	ile)			
	A RATON	FL 33433					83							
							84	City			Fi	85 2	Zip Cod	lo
11. Pursuant i	to the provis	ons of Sections 607	7.0502 an	d 607.	1508, Florida Statu	tes, the al	DOV	L e-pamed	COLOCI	ation submits this statement for the p		• of changin	n ils re	nistored
office or re	egistered ag	ent, or both, in the the the	State of FI	lorida.	Such change was	authorize	d by	y the corp	oration	ration submits this statement for the p n's board of directors. I hereby accep	ot the ap	pointment	as rog	istered
•	m amiliar wi	in, and accept the i	oungation	is oi, s	ection 607.0505, Fi	iorida Stat	utes	S.						
SIGNATURE	Slovetire typed	or printed name of register	nad knam bod	ا المالية	(NA)	II : Dominic ro	d And	ant ricenture	roo had	when reinstating)	DATE.			
12,		OFFICERS				13.		one organico o	require.	ADDITIONS/CHANGES TO OFFIC		D DIBECT	OPS II	J 12
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STREET ADDRESS 7015 BERACASA WAY #201			201			1.3 STREET ADDRES								
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NAME		GEUDGE			occur					,		Citari	J [©] L.	
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STREET ADDRESS		ACH FL 82963						ADDRESS	<u>.</u>	10.50	- 5			
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NAME						3.2 N/	\ME	İ						
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STREET ADDRESS								ADDRESS						

14. I do 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 annual report or supplemental annual 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 12 or Block 3 if changed, or on an atjachment with an address.