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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P93000074917 (4)

J.M. DIAMONDS INC.

**FILED** Apr 21 1998 8:00am Secretary of State



Principal Plac	ce of Busines	55		Mailing Add	iress			· · · · · ·	
189 EAST FLAGLER STREET SUITE 902 MIAM FL 33131 US				169 EAST FLAGLER STREET SUITE 932 MIAMI FL 33131 US					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
									10/21/1993
2. Principal f	Place of Busi	noss	-	<b>2a.</b> Mailing⊿ □□	Address				4. FEI Number Applied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.					65-0444406 Not Applicable
22				27					5. Certificate of Status Desired S8.75 Additional Fee Required
City & State				City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees
Zip	Country			Zip Country			intry		8. This corporation owes or has paid the current year Intangible
24						30			Personal Property Tax due June 30. Yes No
		and Address	of Current Re	gistered Age	ent				10. Name and Address of New Registered Agent
	viselem, ja						81	Name	
169 EAST FLAGLER STREET							82	Street Add	ddress (P.O. Box Number is Not Acceptable)
	JITE 932					83			
MI	iami FL 331	31					8		
							84	City	FL 85 Zip Code
office or	registered ag	ions of Sections gent, or both, in ith, and accept	the State of F	lorida. Such d	change was a	uthorize	d by	the corpora	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE		•	<u>.</u>	·					
	Signature types	or pointed name of re			(NOTE		d Age	ni signature requ	quired when re-instating) DATE
12.	T 6	OFFIC	CERS AND DI		LDELETE	13.	*. *		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	EM, JACOB		L	] DELETE	1.1 10			Change L Addition
NAME STREET ADDRESS	MOCLI	em, jacob <del>YDE Park Cii</del>	58x	5.40.	36 Te	1.2 N		ADDRESS	
CITY-ST-ZIP	HOHA	MAAD EL 920	a F		ala El	383			
TITLE	HOLLIN	100011000	<u> </u>	auderg	DELETE	ر <del>ان اور</del> 2 1 Ti		· zir	Change Addition
NAME	]				<del>-</del>	2.2 N		- 1	
STREET ADDRESS					235			ADDRESS	
CITY-ST-ZIP						2.40	ITY-S	T-ZIP	
TITLE			·· •		DELETE	3.1 T)	I LE		Change Addition
NAME						3.2 N/	ME		
STREET ADDRESS						3.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	ļ			<u> </u>	<b>.</b>	3.4. C	ITY-S	T-ZIP	
TITLE				L	_] DELETE	4.1 TJ	ILE	ŀ	☐ Change ☐ Addition
NAME						4. 2 N			
STREET ADDRESS								ADDRESS	
CITY-SI-ZIP					DELETE	-	TY-ST	I - ZIP	Observa D Addition
HILE				i.	ש טנגנונ	5.1 10			Change L. Addition
NAME CARCEL ADDOCCE						5.2 N/		ADDDECC.	
STREET ADDRESS CITY-ST-ZIP						1		ADDRESS	
TITLE	·-·			<del>-</del>	DELETE	5.4 CI 6.1 TI		- ZIP	☐ Change ☐ Addition
NAME		•		<u>L</u>	J OLCUIL	6.2 NA			C Orange C Audition
STREET ADDRESS								ADDOCCO	
				6.3 STREET ADD 6.4 City - St - Zi					
CITY-ST-ZIP	1					6.4 CI	17-51	-211	+17-11-01-01-01-01-01-01-01-01-01-01-01-01-

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 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 13 if changed, or on an attachment with an address.

SIGNATURE:

305) 3743842