FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT



FLORIDA DEPARTMENT OF STATE

ANNU	JAL REPO 1996	1986 68 4 4 41	Sec	dra B. Mortham cretary of State OF CORPORATIONS				
DOCUI 1. Corporation	MENT : n Name	# P94000	003509 (4)				
DIVERS	SIFIED PEF	ISONAL PLANNING	S, INC.					
Principal Place of Business Mailing Address 20070 OCEAN KEY DR. 9858 GLADES ROAD BOCA RATON FL 33498 142 US BOCA RATON FL 334								
**			US		3.	3. Date Incorporated or Qualified 01/01/1994 3a. Date of Last Report 04/14/1995		
2. Principal Pl	ace of Busines	S	2a. Mailing Address	CKEAN Key DR		FEI Number 65-0468226	1	Applied For Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			Certificate of Status Desired		8.75 Additional Fee Required
City & State	9		City & State 28 Proce RA	ing Eboin	6.	Election Campaign Financing Trust Fund Contribution	<u> </u>	55.00 May Be Added to Fees
Zip 24	2	Country	29 33498	ion, Florio Country 30 PALM OF	8. 20/ 21	This corporation has liability for		
	<u> </u>	nd Address of Current I			10.	Name and Address of New I		ıt
10857 J	D, RICHARD APONICA CO ATON FL 33	URT		83 84 Crty	2007	MOVD Ruch D. Box Number is Not Accepta O OCEAN KEY	AM) S DRIVE	
11. Pursuant t or register	to the provision	s of Sections 607.0502 as	nd 607.1508, Florida Sta	tutes, the above-named of ized by the corporation's	corporation su s board of dir	KATON ubmits this statement for the pullectors. I hereby accept the app	rpose of changing cointment as regis	B3498 g its registered office stered agent. I am
SIGNATURE	X / /	~~/ / / //	d title if applicable.	(NOTE: Registered Agont signature			3/13/96	
12.	Y c. types o		DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	FICERS AND DIRE	ECTORS IN 12
TITLE NAME	STD	, RICHARD S	DELETE	1. 1 TITLE 1.2 NAME	SECR	ETARY TREASURE	CAL DE Chi	
STREET ADDRESS CITY-ST-ZIP		DES ROAD, SUITE 14	2	1.3 STREET ADDRESS	2007	OND RICHARD	JRIVÉ AZUGE	
TITLE	DP	TOTAL C	☐ DELETE	2. 1 TITLE	PRES	RATON, FLA: 3	25776 X Cha	ange Addition
NAME	DIAMOND	DOROTHY M		2 2 NAME		OND DONOTHY M		
STREET ADDRESS	9858 GLA	DES ROAD, SUITE 14	2	2.3 STREET ADDRESS	2007	D Octon Kerly D	RIVE	
CITY-ST-ZIP	BOCA RA	TON FL		2.4 CITY - ST - 7IP	Boca	RATON, PLM. 3	એ વ લ	
TITLE			DELETE	3 1 THLE			☐ Cha	ange
NAME				3.2 NAME				
STREET ADDRESS	i			3.3. STREET ADDRESS	S			
CITY-ST-ZIP TITLE			☐ DELETE	3.4 CHTY - ST - ZIP 4.1 TITLE	-			ange
NAME			occen	4.2 NAME			☐ Cha	niĝe 🔲 Monitori
STREET ADDRESS				4.3 STREET ADDRESS				
CITY-ST-ZIP				4.4 CITY-ST-ZIP				
TITLE			DELETE	5. 1 TITLE			Cha	ange Addition
NAME				5.2 NAME			_	-
STREET ADDRESS				5.3 STREET ADDRESS				
CITY-ST-ZIP			• •	5.4 CHTY-ST-ZIP				
TITLE			☐ DELETE	6 1 TITLE			☐ Cha	ange 🔲 Addition
NAME				. 62 NAME				
STREET ADDRESS				6.3 STREET ADDRESS	!			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 concoration of 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 chapter or a stachment with an address.

6 4 CITY - ST - ZIP

SIGNATURE:

AME OF SIGNING OFFICER OR DIRECTOR

3/13/94 (407) 852-1821