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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 2:55

DOCUMENT # **P94000018629 (3)**

1. Corporation Name

U.S. DIAMOND IMPORTS, CORP.

Principal Place of Business	Mailing Address
~~14 N.E. 1ST AVE.~~ ~~SUITE 1112~~ ~~MIAMI FL 33132~~	~~14 N.E. 1ST AVE.~~ ~~SUITE 1112~~ ~~MIAMI FL 33132~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
03/10/1994	N/A

2. Principal Place of Business	2a. Mailing Address
21 36 N.E. 1ST. STREET	26 SAME
Suite, Apt. #, etc. 22 1001	Suite, Apt. #, etc. 27
City & State 23 MIAMI, FL	City & State 28
Zip / Country 24 33132 25 DADE	Zip / Country 29 30

4. FEI Number: 65-0479167 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JAFARI-ROHANI, MASSOUD 14 N.E. 1ST AVE. SUITE 1112 MIAMI FL FL331-32	81 Name: MR. MASSOUD JAFARI-ROHANI 82 Street Address (P.O. Box Number is Not Acceptable): 36 N.E. 1ST STREET SUITE 1001 83 84 City: MIAMI FL 85 Zip Code: 33132

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: X _____ 04/10/95
Signature, typed or printed name of registered agent and title if applicable — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	11 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	JAFARI-ROHANI, MASSOUD	12 NAME		
STREET ADDRESS	14508 TIENDA	13 STREET ADDRESS		
CITY ST ZIP	CHESTERFIELD MO 63017	14 CITY ST ZIP		
TITLE		21 TITLE		☐ Change ☐ Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY ST ZIP		24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

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)(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: X _____ MR. MASSOUD JAFARI-ROHANI 4/10/95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Title — Daytime Phone #

0133220 CP