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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400018629 (3) ILS. DIAMOND IMPORTS, CORP.

		FILEI)
Jun	19	1997	8:00am
Se	cre	etary o	of State

Principal Place of Business Mailing Address 36 N.E. 1ST STREET SUITE 1001 MIAMI FL 33132 MIAMI FL 33132 MIAMI FL 33132 MIAMI FL 33132 MIAMI FL 33132				······						
US			US				3. Date incorporated or Qualified 03/10/1994	3a. Dat 06/1		ast Report
2. 21	Principal Place of Busin	ess	2a, Mailing Ad	dress			4. FEI Number 65-0479167		-	Applied For Not Applicable
22	Sulte, Apt. #, etc.		Suite, Apt.	#, etc.			5. Certificate of Status Desired			75 Additional ee Required
23	City & State		City & Stat	e			Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees
24	Zip	Country 25	Zip 29	30	unlry		8. This corporation has liability for in Florida Statutes		ax und	ler s. 199.032,
	g, Name	and Address of Curre	ent Registered Agen	l			10. Name and Address of New Reg	istered A	gent	
JAFARI ROHANI, MASSOUD 36 NE 1ST STREET SUITE 1001			81 82	Name Street Addr	dress (P.O. Box Number is Not Acceptable)					
	MIAMI FL 33132				83 84	City		FL	85	Zip Code
11	 Pursuant to the provisi office or registered ag- agent. I am familiar with 	ent, or both, in the Stat	te of Florida. Such ch	ange was authorize	ed by	the corporal	poration submits this statement for the purion's board of directors. I hereby accept	irpose of o	changi intmen	ng its registered it as registered

SIGNATURE			
		Fregistered Agent signature requ	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE (F)	F L DESCRE	1.1 TOLE	Change Addition
NAME **	JAFARI-ROHANI, MASSOUD	1.2 NAME	
STREET ADDRESS	14508 TIENDA	1.3 STREET ADDRESS	
CITY-ST-ZIP	CHESTERFIELD MO	1.4 City-St-Zip	
TITLE 👸	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME 📑		2 2 NAME:	
STAEET ADDRESS		2 3 STREET ADORESS	
CITY-ST-ZIP		2 4 CHY-ST-ZIP	
TITLE 30	☐ DELETE	31 TITLE	Change Addition
NAME 🙄		3.2 NAME	
STREET ADDRESS		3.3 STREE1 ADDRESS	
CITY-ST-ZIP		3.4 CITY ST-ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	Change Addition
, NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY - ST - 7IP	
TITLE	☐ DELETE	G 1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY - S1 - ZIP	

14. I do hereby certify that the information supplied with this filing does not applify 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 proof 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 region of the true into appears in Block 12 or Block 13 if changed in a attenument with an agrees.