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CORPORATION ANNUAL REPORT 1995

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:34

DOCUMENT # P94000083652 (5)

1. Corporation Name

DIAMOND "B" ~~VENTRUES~~ VENTURES, INC.

Principal Place of Business	Mailing Address
7300 ALHAMBRA BOULEVARD MIRAMAR FL 33023	7300 ALHAMBRA BOULEVARD MIRAMAR FL 33023

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/14/1994	3a. Date of Last Report: N/A
4. FEI Number: 65-0532623	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21 4301 S. University Dr. # A-3	26 1301 S. University Dr. # A-3
Suite, Apt. #, etc. 22 Suite A-3	Suite, Apt. #, etc. 27 Suite A-3
City & State 23 Davie FL	City & State 28 Davie, FL
Zip / Country 24 33328 / 25 USA	Zip / Country 29 33328 / 30 USA

9. Name and Address of Current Registered Agent

AUTON, N. SCOTT
7300 ALHAMBRA BOULEVARD
MIRAMAR FL 33023

10. Name and Address of New Registered Agent

81 Name: AUTEN N. Scott
82 Street Address (P.O. Box Number is Not Acceptable): 7300 Alhambra Blvd.
83
84 City: Miramar FL 85 Zip Code: 33023

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: [signature] Owner/President 1/5/95
(Signature of new registered agent and the appointee) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	AUTEN, N. SCOTT	12 NAME	
STREET ADDRESS	7300 ALHAMBRA BOULEVARD	13 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33023	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 hereby certify that the information supplied with this report is true, complete and accurate. 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attached sheet, with an address.

SIGNATURE: [signature] N Scott Auten 1/5/95 561 610 9752
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

0423304 FP