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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000035521 (0)

BLACK DIAMOND OF GREATER ORLANDO, INC.

Mailing Address Principal Place of Business 2202 CURRY FORD ROAD PO BOX 23458 FT LAUDERDALE FL 33307-3458 ORLANDO FL 32806 2. Principal Place of Business 2a. Mailing Address 21 26

FILED Mar 25 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/05/1995 4. FEI Number Applied For 65-0638441 Not Applicable Suite, Apt. #, etc \$8.75 Additional Suite, Apt #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Žip Zio Country B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OATES, DANIEL E PA 1500 E ATLANTIC Street Address (P.O. Box Number is Not Acceptable) STE B **B3** POMPANO FL 33060 Zip Code 84 City 85 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. (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed nume of registured agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change ■ DELETE 1.1 TITLE TITLE WINTER, JOHN T 1.2 NAME NAME **990 SE 5TH CT** 1.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 1.4 DITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE WINTER, JANICE T 22 NAME NAME 990 SE 5TH CT 23 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition DELETE 3.1 TITLE TITLE THOMPSON, JASON L 3.2 NAME NAME 331 SW 18TH CT 3.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-7JP Change __ Addition DELETE 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - ST - ZIP

14. 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:

Much 20, 1998