## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 25, 2001 8:00 am Secretary of State DOCUMENT # P95000066497 DIAMOND MOTOR SPORTS, INC. -25-2001 90050 002 \*\*\*150.00 Principal Place of Business Mailing Address 2280 10TH STREET, SOUTHEAST 2280 10TH STREET, SOUTHEAST LARGO FL 33771 LARGO FL 33771 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3337581 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Bequired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DIAMOND, ROBERT F Street Address (P.O. Box Number is Not Acceptable) 2280 10TH STREET SE LARGO FL 33771 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PSD Addition ☐ Change TITLE TITLE ☐ Delete DIAMOND, ROBERT F NAME NAME 2280 10TH STREET, SOUTHEAST STREET ADDRESS STREET ADDRESS LARGO FL 33771 CITY-ST-ZIP CITY-ST-7IP Change Addition TITLE ☐ Delete TIT1 F DIAMOND, ROBERT F II NAME NAME 2280 10TH STREET, SOUTHEAST STREET ADDRESS STREET ADDRESS **LARGO FL 33771** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Detete TITLE TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED