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

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000012463 (1)

DIAMOND AIRE OF VENICE, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 15 1998 8:00am Secretary of State



317 PARK BLVD., NORTH VENICE FL 34285		317 PARK BLVD., NORTH VENICE FL 34285		DO NOT WRITE IN THIS	SPACE		
					3. Date incorporated or Qualified 02/08/1996	<u> </u>	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	- Ar	plied For
21		26			65-0641318	<del></del>	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	<del></del>
22 City & State		27			5. Certificate of Status Desired		
23 City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Coun	ry	8. This corporation owes or has paid the cu	rrent year Int	angible
24	25	29	30				] No
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
i HU	NTER, LEIGHTON W		8	1 Name			
317 PARK BLVD., NORTH				2 Street Add	dress (P.O. Box Number is Not Acceptable)		
VENICE FL 34285				2 311001 Aut	dress (7:0: Box Norriber is Not Acceptable)		
1-	10B 1 E 0 1E00		8	3			
							ľ
				4 City	FL		1
11. Pursuant t	o the provisions of Sections 607.05	502 and 607 1508, Florida Statut	es, the abo	ve-named co	rporation submits this statement for the purpose of	of changing its	s registered
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							ŀ
Olonarone .	Signature, typed or printed name of registered a	gord and triu if applicable (NOT	E: Registered A	gent signature requ	ured when reinstating) DATE		<del></del>  ,
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S IN 12
TITLE	D	DELETÉ	1.1 TITLE	·		☐ Change	☐ Addition
NAME	<b>HUNTER, LEIGHTON W</b>		1.2 NAM				
STREET ADDRESS	317 PARK BLVD., NORTH		1.3 STRE	ET ADDRESS			13
CITY-ST-ZIP	VENICE FL 34285 1.40		1.4 CITY	-ST-ZiP			[]
TITLE	Ō	☐ DELET <b>É</b>	2.1 TITLE	•		Change	Addition
NAME	CLAXTON, RAYGHTON W		2.2 NAM				
STREET ADDRESS			2.3 STRE	E1 ADDRESS			
CITY-ST-ZIP	CADACOTA EL CACAC			- ST- ZIP			
TITLE			3.1 TITLE			Change	Addition
NAME	<del></del>		3.2 NAM	ľ			
STREET ADDRESS			4	ET ADDRESS			
CITY-ST-ZIP			3.4, CITY				
TITLE			4.1 TITLE			Change	Addition
NAME			4. 2 NAM			vildings	e could the
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE	······································	DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAM				
STREET ADDRESS			1	T ADDRESS			
City-ST-ZIP				1			
TITLE		DELETE	5.4 CITY- 6.1 TITLE	31-ZIP		Change	Addition
NAME		C orrest				Grange	- Audition
· · · · · · · · · · · · · · · · · · ·			6.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			6.4 CHY-	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 atjactment with an address.