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

PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000077923 (6)

DIAMONDSTAR NETWORK, INC.

Principal Place of Business	Mailing Address
734 WEST COLONIAL DRIVE ORLANDO FL 32804	734 WEST COLONIAL DRIV ORLANDO FL 32804

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business		Mailir	Mailing Address					14510 18110 118	(
734 WEST COLONIAL DRIVE ORLANDO FL 32804			734 WEST COLONIAL DRIVE ORLANDO FL 32804				DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified			
							09/18/1996			
2. Principal P	lace of Business	2a. M	ailing Address	J		·- ·- · · · · · · · · · · · · · · · · ·	4, FEI Number	A	pplied For	
21		26					59-3364756		ot Applicable	
Suite, Apt. #, etc.		Si	Suite, Apt. #, etc.				S8 75 Additional			
22		27	27				5. Certificate of Status Desired	Fee R	equired	
City & State		Ci	City & State				6. Election Campaign Financing	\$5.00	May Be	
23							Trust Fund Contribution	Added	to Fees	
Zip	Country	Zi	р		untry	•	8. This corporation owes or has paid the curr			
24	25	29		30					No	
	9. Name and Address of Curren	it Hegister	ed Agent		04	Name	10. Name and Address of New Registered A	lgent		
)WER, BRUCE W				81	Name				
	NORTH MAITLAND AVENUE				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
MAI	ITLAND FL 32751					·- ··· · · · · · · · · · · · · · · · ·				
					83					
					84	City		85 Zip	Code	
					Ш		<u> </u>			
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607. of Florida	1508, Florida Statu Such change was	ites, the a authorize	bove d hv	e-named cor the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	changing i	ts registered registered	
agent. I a	m familiar with, and accept the obliga	ations of, S	ection 607.0505, F	lorida Sta	tutes	3.				
SIGNATURE										
10	Signature, typed or pented name of registered age OFFICERS ANI			Registere	d Age	nt signature requ	DATE ADDITIONOGOLIANOSO TO OFFICERO AND	DIDECTOR	2011.40	
12.	D	Dinecie	DELET E	1.1 7	(TLF	r	ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition	
NAME	ROBERTS, HARRIOT		and others	1.2 N				onungo		
STREET ADDRESS	784 W. COLONIAL DR.					ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32804				ITY-S					
TITLE	ST ST		DELET E	2.1 T		1 - 215		Change	Addition	
NAME	ROBERTS, THOMAS		-	2.2 N						
STREET ADDRESS	734 WEST COLONIAL DRIVE					ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32804					ST - ZIP			1	
TITLE	On Driving of E deady		DELETE	3.1 1		51.711		Change	Addition	
NAME			_	3.2 N						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP						ST-ZIP				
TITLE			DELETE	4.1 78		,, EII	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME				4.21						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP					ITY-S					
TITLE			DELETE	5.1 TI		, 211	-	Change	Addition	
NAME				5.2 N						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP					incli ITY-S1					
TITLE		· · · · · · · · · · · · · · · · · ·	DELETE	6.1 TI		1 211		Change	Addition	
NAME			<u> </u>	6.2 N						
STREET ADDRESS						ADDRESS				
CITY-ST-7IP					INEET ITV-SI					
LHII-SI-/P				= h41:						

14. Thereby 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.