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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENTANE STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000024668 (0)

DIAMOND ADVISORS AND CONSULTANTS INC.

FILED Feb 06 1998 8:00am Secretary of State



Principal Place of Business			Mailing Address								
8212 SOUTHWEST 26 STREET			6212 SOUTHWEST 26 STREET								
MIRAMAR FL 33023		M	IIRAMAR FL 33023					DO NOT WRI	TE IN THIS S	PACE	
İ								3. Date Incorporated or Qualified		- AOL	
<u>[</u>								03/13/1997			
2. Principal Place of Bu	sinoss	2a.	Mailing Address					4. FEI Number		TA	pplied For
21			26					65-0766494		N	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional	
22			27				S. Commodic of States Desired		Fee R	equired	
City & State			City & State				6. Election Campaign Financing	- 7		May Be	
Zip	Country		28			intry		Trust Fund Contribution	<u>[.]</u>		to Fees
24	25	29	24,	—	30			 This corporation owes or has Personal Property Tax due Ju 			No
	ne and Address of Curre		ered Agent	1001]			10. Name and Address of New I			
THOMPSON	I, GEORGE				81	Nam	0				
6212 SOUTHWEST 26 STREET						Stror	Addres	ss (P.O. Box Number is Not Accept	ahla)		
MIRAMAR FL 33023			,			Olibe	a Nadio	as (F.O. DOX Number is NOT ACCEPT	abioj		
					83						
					84	City				85 Zip	Code
	•				L				FL		
11. Pursuant to the prov	visions of Sections 607.050	2 and 60	07.1508, Florida Stati	utos, the a	bove.	a-name	ed corpoi	ration submits this statement for the n's board of directors. I hereby acc	purpose of	changing i	ts registered
agent. I am familiar	with, and accept the oblig	ations of,	Section 607.0505, F	lorida Sta	tutes	s.	Jipioratio	ors board of directors. Thereby acc	ept trie app	JIIMHORK a s	regisiereu
SIGNATURE							· -				
	ed or printed name of registered age OFFICERS AN				d Age	nt signati	ure required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE LICEBO AND	DIDECTO	DC IN 10
12.	MACUT	Dinto	DELETE	13.	Ti F			ADDITIONS/CHANGES TO OF	ICENS AND	Change	Addition
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STREET ADDRESS 621	2 SW 7414	STEC	ECT			ADDRESS					
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CITY-ST-ZIP				2.40	illy - S	51- <i>2</i> (P	1				
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NAME '				3.2 N	AMξ						
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NAME				4 2 N	IAME						
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CITY-ST-ZIP			Dritze		1Y-5	1-7IP	4			Chance	Addata
TITLE			☐ DELETE	6.1 Te						Change	Addition
NAME				6.2 N							
STREET ADDRESS						ADDRESS	3				
CITY-SI-ZIP	the information supplied w	ith this file	ing does not qualify		1Y-51		lad in Se	action 119 07/3V/i) Florida Statutes	I further our	life that the	information

a. I nereby 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 suppliemental 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

America The

BEGGE Thomason

1-13-98 (954) 981-7323