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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000037190

1. Corporation Name

DIAMOND-BAR, INC.

Principal Flace of Business	Mailing Address
8466 N. ŁOCKWOOD RIDGE RD., STE. 300	8466 N. LOCKWOOD RIDGE RD

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90279 006 ***158.75



			_				
Principal Flace of Business Mailing Address						100 11111 1000 11011	• 10111 0011 1001
8486 n. łockwood ridge Rd., STE., 300 Sarasota Fl 34243		8466 N. LOCKWOOD RIEGE SARASOTA FL 34243	8466 N. LOCKWOOD RIDGE RD., STE. 300 SARASOTA FL 34243		DO NOT WRITE IN TI	IIS SPACE	
					3. Date Incorporated or Qualifed	TIO OI AGE	
					04/25/1997		Į
9 Dd	lace of Business	2a. Mailing Address			4. FEI Number		polied For
Z. Principal P	lace of Business	├ - ¬			65-0751797	⊢ +−-	o Applicable
21 Suite / pt	# oto	Suite, Apt. #, etc.			03 0/3//9/		Additional
Suite, 7.pt.	Suite, /.pt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	•	e quired
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23	•	28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country		8. This corporation owes the current year	Intangible	
24	25	29	30		Personal Property Tax.	∐Yes	□No
	9. Name and Address of Curi		-		10. Name and Address of New Registere	d Agent	
			81	Name			
	enberg, trey		82	Stroot Aito	dress (P.O. Bo: Number is Not Acceptable)		
8466	N. LOCKWOOD RIDGE RD.,	STE. 300	02	Street And	mess (F.O. BOX Number is Not Acceptable)		
SAR	ASOTA FL 34243		83				
				0		or Zin	Code
			84	City	F	85 Zip	Code
office or 6	egistered agent, or brith, in the Sta	i502: and 607.1508, Florida Statute: ite of Florida. Such change was au igations of, Section 607.0505, Flori	thorized by	the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing its	eçistered
	Signature, typed or printed ni me of registered			t signature requir	red when reinstating) DATE		
12.		ANI) DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	Addition
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition
NAME	DESENBERG, TREY	DD 077 000	1.2 NAMÉ	ĺ			
STREET ADDRESS	8466 N. LOCKWOOD RIDGE	. RD., STE. 300	1.3 STREET	ADDRESS			j
CITY-ST-ZIP	SARASOTA FL 34243		1.4 CITY-ST	-ZiP		Change	Addition
TITLE		☐ DELETE	2.1 TITLE			Change	Aodalon
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS			Į
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP		[7] Change	Addition
TITLE		☐ DELETE	3 1 TITLE			□ change	[] Accepton
NAME			32 NAME				
STREET ADDRESS			3.3 STREET				
City-st-zip		Doriete	3.4. CITY-S	T-ZSP		☐ Change	Addition
TITLE		☐ DELETE	4.1 TITLE				C) Addition
NAME			4.2 NAME				
STREET ADDRESS			4 3 STREET				
CITY-ST-ZIP		D DELETE	4.4 CITY-ST	- ZIP		Change	☐ Addition
TITLE		☐ DELETE	5.1 TITLE			□ change	
NAME			5.2 NAME	ADDDECC			
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP		The sector	5.4 CITY-ST	- ZIP		Change	Addition
TITLE		☐ DELETÉ	6.1 TITLE	{		Change	L'I Vocanou
NAME			6.2 NAME				
STREET ADDRESS	†		6.3 STREET	ADDRESS			

14. 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, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR