2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

200 S. BISCAYNE BLVD

C/O WHITE & CASE, FIRST UNION FINANCIAL CNT

DOCUMENT # **P97000058626**

2600 ISLAND BLVD

SUITE 301

DIARQ CORPORATION

Principal Place of Business

MIAMI FL 33131-2310 WILLIAMS ISLAND FL 33160 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State-65-0765054 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name "JACOME," SUSANA" Street Address (P.O. Box Number is Not Acceptable) 2600 ISLAND BLVD #301 AVENTURA FL 33160 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition Change Delete TITLE TITLE DE LA CONCHA, PABLO C NAME NAME 2600 ISLAND BLVD., SUITE 301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **AVNEUTURA FL 33160** CITY-ST-7IP Change Addition TITLE □ Delete DE DAYAN, ALLEGRA H NAME NAME 2600 ISLAND BLVD., SUITE 301 STREET ADDRESS STREET ADDRESS AVNEUTURA FL 33160 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE DE LA TORRE, MARIA E NAME NAME 2600 ISLAND BLVD., SUITE 301 STREET ADDRESS STREET ADDRESS CITY-ST-7IP AVNEUTURA FL 33160 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE JACOME, SUSANA NAME NAME 2600 ISLAND BLVD., SUITE 301 STREET ADDRESS STREET ADDRESS **AVNEUTURA FL 33160** CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME 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

13. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-2-00

FILED Mar 07, 2000 8:00 am **Secretary of State**

03-07-2000 90100 022 ***150.00