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 # P97000063945 (4)

DIVERSO ENTERPRISES, INC.

Principal Place of Business

Mailing Address

SOOS WASHINGTON DOAD #1002

3800 WASHINGTON ROAD #1002

FILED May 05 1998 8:00am Secretary of State



(61) 823-7473

WEST PALM BEACH FL 33405		WEST PALM BEACH FL 33405			DO NOT INDITE INTUIO OD LOT	
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
					07/22/1997	
2. Principal Place of Business 2a. Mailing Add			ess		4. FEI Number Applied For	
21 1800 V				FA 65-6775664 Not Applicable		
Suite, Apt.	#, etc. 20VMUGNG WAY	Suite, Apt. #, etc.	Stiffe, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
22 @ ろ City & State	City P. Proto			Fee Hequired		
23 W CST	PARM BEACH, FL	City & State	City & State		6. Election Cempaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country Zip		 	Country		8. This corporation owes or has paid the current year Intangible	
24 354	01 25 USA	├ ─ ` ├ -	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent	
KLINE, CHARLES ESQ.				81 Name		
831 N. DIXIE HWY.			82 Street Address (P.O. Box Number is Not Acceptable)			
LAKE WORTH FL 33460						
			83	1		
			84	City	85 Zip Code	
dd Durauant i	to the provisions of Spoliops 607 (F02	and COZ 1500. Elected Ctatutor			FL 89 ZP COOR	
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, Soction 607.0505, Florida Statutes.						
	m familiar with, and accept the obligat	ions of, Section 607.0505, Flor	ida Statute	S.		
SIGNATURE	Stgrature, typied or pointed name of registered agent	and trie if applicable (NOTE	Registered Ad	ent signali	re required when reinslating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELE TE	1.1 TITLE		☐ Change ☐ Addition	
NAME	CHRISTOPHERSON, EUGENE		1.2 NAME			
STREET ADDRESS 3800 WASHINGTON ROAD #1002			1.3 STREE	ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33405		1.4 City-	ST - ZIP		
TITLE		☐ DELĒTĒ	21 THILE		☐ Change ☐ Addition	
NAME			22 NAME			
STREET ADDRESS			2.3 STREE	ADDRESS		
CITY-ST-ZIP		Decem	2 4 CITY-	ST - ZIP		
TALE		☐ DELFTE	3.1 TITLE			
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - 4.1 TITLE	51 - ZIP	Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE			
CITY-ST-ZIP			4.4 CITY - 1			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREE	ADDRESS	1	
CITY-ST-ZIP			5 4 CITY-5	ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			6 3 STREE	ADDRESS	1	
CITY-ST-ZIP			6.4 CITY-			
indicated	on this annual report or supplemental.	annual report is true and accur	rate and th	at my s	ted in Section 119.07(3)(i). Florida Statutes. I further certify that the information ignature 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.						
DIOCK 12 OF DIOCK 13 IF CHARIGOU, OF OFFI AT AUTOLITICAL WITH ALT AUTOLITICAL WITH AUTOLITICAL WIT						