PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000081166

1. Corporation Name

DIVERSE BUSINESS, INC.

Mar 12, 1999 8:00 am Secretary of State

03-12-1999 90014 027 ***150.00 03-12-1999 90014 028 *****8.75



Principal Place	e of Business	Mailing Address		1 100 illaht ilm ibitt ibatt Abiet enter antie sat	At smini indat rinin a	
700 51 ST. 700 51 ST.						
MIAMI BEACH FL 33140 MIAMI BEACH FL 33140		•	DO NOT WRITE IN TH	D 2040E		
					SPACE	
				3. Date Incorporated or Qualifed		1
<u> </u>				09/18/1997		lied For -
2. Principal Place of Business 22. LT. 2a. Mailing Address 25. 12913 Sw 132 LT. 26. 12913 Sw 132			2 CT.	4. FEI Number	~·· ·	Applicable
21 04			201.	65-0786647	\$8.75 Ad	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	Fee Rec	
22		City & State		& Flactice Compaign Financing	\$5.00 N	<u>'</u>
City & Stat	mi Fl.	28 Mall, Fl.		6. Election Campaign Financing Trust Fund Contribution	Added to	-
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24 22 10	25 OH	29 23 10 0 30	USFI	Personal Property Tax. 10. Name and Address of New Registere		- MO
	9. Name and Address of Currer	nt Registered Agent	81 Name	To. Name and Address of New Registere	n Washi	
EED	NANDEZ, JOSE A		O I Name	<u> </u>		
8067 SW 73 AVE #26			82 Street Ad	ldress (P.O. Box Number is Not Acceptable)		
			83		_	_
#20 MIAMI FL 33143		83				
IMIM	VII FE 33 143		84 City		85 Zip C	ode
				<u> </u>	L ·	n gistarad
office or r	enistered agent or both in the State	of Florida, Such change was author	rized by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the app	ointment as reg	istered
agent. I a	im familiar with, and accept the obliga	itions of, Section 607.0505, Florida	Statutes.			
SIGNATURE				uired when reinstating) DATE	- <u>-</u>	
12.	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Reg	istered Agent signature requ 13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
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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 supplied 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 of an attachment with an address, with all other like empowered.

SIGNATURE: