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

CITY - ST - ZIP

STREET ADDRESS

TITLE

NAME

FILED Mar 19 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # 1. Corporation Name P97000106659 (0) BLUE DIAMOND TRADING, CO. Principal Place of Business Mailing Address 917 ANCHORAGE ROAD 917 ANCHORAGE ROAD **TAMPA FL 33602** TAMPA FL 33602 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/18/1997 FEI Numbe 2. Principal Place of Business 2a. Mailing Address Applied For 917 Ancherage 21 26 Not Applicable Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Hillsbour 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MANEY, RICHARD H RICHARD MANEY & ASSOCIATES, P.A. 82 Street Address (P.O. Box Number is Not Acceptable) 101 EAST KENNEDY BOULEVARD #3170 **TAMPA FL 33602** 83 City R4 Zip Code 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, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Director Change Cynthia Wilcox KREMER, CECILIA NAME 12 NAME 917 ANCHORAGE ROAD 1965 Broadway STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33602** 10023 New York CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Director 21 TITLE Change TITLE Heinrick Kremer 2.2 NAME NAME 917 Anchorage Rol 2.3 STREET ADDRESS STREET ADDRESS TAMpa Ti 33607 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - \$T - ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. 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 animal report or supplemental armust report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or furstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with as address. 3-7-98 813-240-6996 SIGNATURE:

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

Change

Addition

DELFTE