

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000031171

1. Entity Name
DIVA ENTERTAINMENT, INC.



Principal Place of Business

180 VARICK ST., 13TH FLOOR
C/O Q MANAGEMENT
NEW YORK, NY 10014

Mailing Address

180 VARICK ST., 13TH FLOOR
C/O Q MANAGEMENT
NEW YORK, NY 10014



04022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2416989

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PANZA, MAURER & MAYNARD, ATTN LINDA FRAZIER
3600 N. FEDERAL HIGHWAY
BANK OF AMERICA BLVD., 3RD FLOOR
FT. LAUDERDALE, FL 33308

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

00000010279

04/12/04-P98000031171-150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEOP ZACHARIOU, PETER 180 VARICK ST., 13TH FLOOR NEW YORK, NY 10014
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFOD LEAN, DAVID 180 VARICK ST., 13TH FLOOR NEW YORK, NY 10014
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD KOLSRUD, JEFF 180 VARICK ST., 13TH FLOOR NEW YORK, NY 10014
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/04
Date

212.807.6777
Daytime Phone #