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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P98000041996

Corporation Name

THE LINDA DIAMOND CORPORATION

## FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90009 013 \*\*\*150.00



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Principal Place	of Business	Mailing Address						
6460 CHAPMAN FIELD DRIVE 6460 CHAPMAN FIELD DRIVE								
MIAMI FL 33156 MIAMI FL 33156						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						05/08/1998		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Ar	plied For
21		26	26			65-0844817	No.	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
22		27	27			5. Certificate of oldred begins	Fee Re	equired
City & State	9	City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cour			8. This corporation owes the current year Ir		
24	25		30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	t Registered Agent		1		10. Name and Address of New Registered	Agent	
DIAL	AOND LINDA		j	81	Name			
DIAMOND, LINDA 6460 CHAPMAN FIELD DRIVE			ŀ	82	Street Addre	t Address (P.O. Box Number is Not Acceptable)		
MAN			83					
				84	City	· · · · · · · · · · · · · · · · · · ·	85 Zip	Code
			J		•	· FI	_ ]	
office or re agent, I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligated in the control of	of Florida. Such change was auf	lhorized	by t	the corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the appoint	f changing its pintment as re	registered egistered
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: F	Registered	Agen	signature required			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PTD	☐ DELETE	1.1 TIT	LE		•	Change	☐ Addition
NAME	DIAMOND, LINDA		1.2 NA	ME				
STREET ADDRESS	6460 CHAPMAN FIELD DRIVE		1.3 ST	REET	ADDRESS			Į
CITY-ST-ZIP	MIAMI FL 33156		1.4 CIT	Y-ST	- ZIP			
TITLE	VSD	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME	DIAMOND, BARRY		22 NA	ME				
STREET ADDRESS	6460 CHAPMAN FIELD DRIVE		2.3 ST	REET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33156		2. 4 CI	TY-S	T-ZIP	ar	·	
TITLE		☐ DELETE	3.1 TIT				☐ Change	☐ Addition
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET	ADDRESS			
CITY-ST-ZIP			3.4. CI		Ì			
TITLE		☐ DELETE	4.1 TIT				☐ Change	Addition
NAME			4. 2 NA	ME				
STREET ADDRESS					ADORESS			}
CITY-ST-ZIP			4.4 CIT					
TITLE		☐ DELETE	5 1 TIT				☐ Change	Addition
NAME			5.2 NA					
STREET ADDRESS			5.3 ST	REET	ADORESS			
}			5.4 CIT		J			ļ
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TIT				Change	Addition
l i			6.2 NA					_
NAME			1		ADDRESS			
STREET ADDRESS			6.4 CIT					1
CITY-ST-ZIP			0.4 OI	1 - 31				

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 annual report or supplemental 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 on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15/99

305-661-1446

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