2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 13, 2000 8:00 am Secretary of State DOCUMENT # P98000043984 1. Entity Name DIAMOND MOTORCARS, INC. 07-13-2000 90021 042 ***150.00 Principal Place of Business Mailing Address 3750 DIAMOND STREET 3750 DIAMOND STREET PACE FL 32571 PACE FL 32571 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3509772 Not Applicable Zip Country * -----Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FORD, WALTER R Street Address (P.O. Box Number is Not Acceptable) 3750 DIAMOND STREET **PACE FL 32571** City Zin Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. TITLE Change ☐ Addition Delete TITLE FORD, WALTER R NAME NAME STREET ADDRESS STREET ADDRESS 5678 SANDSTONE DR CITY-ST-ZIP CITY-ST-ZIP **PACE FL 32571** ☐ Addition TITLE ☐ Change TITLE ☐ Delete HARTSFIELD, MICHEAL T NAME STREET ADDRESS 3649 ANDREW JACKSON DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PACE FL 32571 ☐ Addition ☐ Defete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TITI P NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Change TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

WALTER R. FORD



AHachment DHPA8000043984 QU69817

RE: 2000 UBR REPURT

1/1/00

THIS IS TO ADVISE THAT THE FIRST REPORT WAS HEVER RECEIVED.

THIS WAS REPORTED TO MR LEE YARBROUGH TODAY. PLEASE ACCEPT

THIS FEE OF 150.00 TO SATISFY OUR REQUIREMENTS.

THAMK you. Walge Ford Pres.