PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENTACE STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000087578

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90082 034 ***150.00

DIAMONDS GOLD XPRESS CORPORATION Malting Address Principal Place of Susiness 15555 NW 12TH COURT 15555 NW 12TH COURT PEMBROKE PINES FL 33028 PEMBROKE PINES FL 33028 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 10/12/1998 Applied For 4. FEI Number 65-0866434 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing \square Added to Fees Trust Fund Contribution 23 28 Zip Country 8. This corporation owes the current year intangible Country Zio Yes Yes □Na Personal Property Tax. 29 30 25 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name VASWANI, ANITA 82 Street Address (P.O. Box Number is Not Acceptable) 15555 NW 12TH COURT PEMBROKE PINES FL 33028 83 84 85 Zip Code City 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, typed or printed name of registered egent and title if applicab ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Change DELETE TITLE CR2E034 VASWANI, ANITA 12 HANE NAME 15555 NW 12TH COURT 1.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33028 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 21 TTLE mle 22 NAME VASWANI, RAJESH NAME 15555 NW 12TH COURT 2.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33028 2.4 CITY-ST-ZIF CITY-ST-ZIP Addition Change DELETE 31 TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-\$T-ZIP CITY-ST-ZIP ☐ Addition DELETE Change 41 TITLE TITLE 4 2 NAME A 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition 6.1 TITLE DELETE TITLE 6.2 NAME NAME 6 3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 ceth; 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 12 if shanged, or on an attachment with an address, with all other like empowered.

SIGNATURE

Shipe & Vaniani

Date

Daytime Phone #

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