

9-4-95 13-2965-C
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Montman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V39200 (3)

1. Corporation Name

**DUNKIN'S DIAMONDS & GOLD, MANAGEMENT DIVISION IN
C.**

Principal Place of Business

**% CORPORATE SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

Mailing Address

**% CORPORATE SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -1, PM 1:41

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/27/1992

3a. Date of Last Report

05/10/1994

4. FEI Number

65-0338133

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

842 South 30th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State
Heath, Ohio

23

28

Zip

Country

Zip

Country

24

25

29

43056

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**D
SHERMAN, JASON
774 SOUTH 30TH STREET
HEATH OH**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

842 South 30th Street

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**D
SHERMAN, LINDA
774 SOUTH 30TH STREET
HEATH OH**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

842 South 30th Street

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**D
DUNKIN, STUART
774 SOUTH 30TH STREET
HEATH OH**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

**Dinkin, Stuart
842 South 30th Street**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 817, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR