

FILED

03 JUL 14 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #V39200					
1. Entity Name DUNKIN'S DIAMONDS & GOLD, MANAGEMENT DIVISION INC.					
Principal Place of Business % CORPORATE SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			Mailing Address 897 HEBRON ROAD SUITE 103 HEATH, OH 43056 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0338133	
				Applied For Not Applicable	
5. Certificate of Status Desired ☐				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Karl Vice Street Address (P.O. Box Number is Not Acceptable) 1441 Tamiami Trail City Port Charlotte FL Zip Code 33952		
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 <u>Karl J. Vice</u> <u>Karl J. Vice</u> <u>7-8-03</u> (NOTE: Registered Agent's signature required when submitting)					
FILE NOW!! FEB. IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHERMAN, JASON 897 HEBRON ROAD, SUITE 103 HEATH, OH 43056	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Stuart Dinkin 897 Hebron Rd. suite 103 Heath, OH 43056	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DINKIN, STUART 897 HEBRON ROAD, SUITE 103 HEATH, OH 43056	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Patrick Knott 897 Hebron Rd. suite 103 Heath, OH 43056	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KEYES, JEFFREY 897 HEBRON ROAD, SUITE 103 HEATH, OH 43056	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. 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 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: <u>Jeffrey Keyes</u> <u>Jeffrey Keyes</u> <u>7/7/03</u> <u>788-8610</u>			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR One Daytime Phone #		

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