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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name V58365

(0)

DIAMONDS AND GOLD BY MICHAEL, INC.

FILED Mar 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				·		
		11401 PINES BLVD				
11401 PINES BLVD STE 270			270			
PEMBROKE FL 33026			PEMBROKE PINES FL 33026		DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified	
					08/18/1992	
	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			65-0352782 Not Applica	<u>əlc</u>
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.	⊢		5. Certificate of Status Desired \$8.75 Additional Fee Regulred	
22		27				
City & State		⊢ ′	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		28	Zip Country		This corporation owes or has paid the current year Intangible	\dashv
24	25 29		30		Personal Property Tax due June 30.	
24]	9. Name and Address of Cu		301	·	10. Name and Address of New Registered Agent	\neg
SA	MOSKY, MICHAEL		- 1	11 Name		
1131 NW 185TH AVE			ļ.	0	(D.O. David umbas in Mot Assentable)	-
		[3	Street Add	Iress (P.O. Box Number is Not Acceptable)		
	MBROKE PINES FL 33029		1	13		
ļ			<u> </u>		[L7: 0.4-	_
			{	City	FL 85 Zip Code	
11. Pursuant t	o the provisions of Sections 607	.0502 and 607.1508, Florida Statute	s, the abo	ove-named corp	poration submits this statement for the purpose of changing its register	ed
office or re	naletored agent or both in the S	State of Florida. Such change was a bligations of, Section 607.0505, Flo	uthorized	by the cornoral	ation's board of directors. I hereby accept the appointment as registered	1
_	in partition with, and accept the c	Angadoria di, decidir der .coco, i lo	riad olala	.00.		
SIGNATURE .	Signature, typed or printed name of registers	d agent and title if applicable (NOTE	Registered	Agent signature requi	ired when reinstating) DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELE te	DELETE 1.1 TITL		Change Addit	ion
NAME	SAMOSKY, MICHAEL J.		1.2 NAN	IE		
STREET ADDRESS 1131 NW 185TH AVE			1.3 STREET ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL		1.4 C(T)	'-ST-ZIP		
TITLE	0	☐ DELETE	2.1 TITL	E	Change Addit	ŧon
NAME			2.2 NAN	IE j	Ø- ₁	
STREET ADDRESS	3940 INVERRARY BLVD.,		2.3 STR	EET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	3.1 TITL		Change Addit	ווטו
NAME			3.2 NAN	1		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		Dr. Fee		Y-ST-ZIP	Change Addit	rion
TITLE		L. DELETE	4.1 TITL		Change Citydon	ויעו
NAME			4. 2 NAI	1		
STREET ADDRESS			1	EET ADDRESS		İ
CITY-ST-ZiP		DELETE		'-ST-ZIP	Change Addit	ion
TITLE			5.1 TITLE		C Origing C Multi	·"
NAME			5.2 NAA			
Street Address				EET ADDRESS		
CITY-ST-ZIP		DELETE	_	'-ST-ZIP	Change Addit	ion
TITLE		- Detel	6.1 TITL		C Ontaing C Mount	""
NAME			6.2 NAN			
STREET ADDRESS			1	EET ADORESS		- [
CITY-ST-ZIP	ertify that the information supplie	ad with this filing does not qualify for		r-ST-ZIP	Section 119.07(3)(i). Florida Statutes, I further certify that the information	ᆔ

Indicated on this annual report or supplied with this nining does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. I further certify that the informatic indicated on this annual report is suppliemental 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 fusite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapters.