## 2007 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT** DOCUMENT # N99000001362 FUTURE DIAMONDS INC.



**FILED** 

Apr 24, 2007 8:00 am Secretary of State

04-24-2007 90016 014 \*\*\*\*70.15

Principal Plac	o of Business		Mailio	n Address				<b>-</b>			*.
Principal Place of Business Mailing Address 6045 LACE WOOD CIRCLE 6045 LACE WOOD CIRCLE							·				
LAKE WORTH, FL 33462  LAKE WORTH, FL 33462							· [ ·				
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2. Principal Rlace of Business - No P.O. Box # 3. Mailing Address											
				Jame			1 10 11 11 11 11		BRIS BRITT BRIDE	1886 (ITIN 81119 I	INTER BY 1981
				Suite, Apt. #, etc.			- 04400007				
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7:0 > 0				p Country			- 00 000		<u> </u>		ot Applicable
133469 bignity			Zip Cou			5. Certificate of Status Desired \$8.75 Additional Fee Required					
			Danieto es				<u> </u>				
6. Name and Address of Current Registered Agent						7:- Name aird Address of New Registered Agent					
CORPORATE CREATIONS						Name					
941 FOURTH STREET						Street Addre	Street Address (P.O. Box) Number is Not Acceptable)				
MIAMI BEACH, FL 33139											
The same of the control of the contr										·	
•										1 ~ ~	
						City	City FL Zip Code				
-8 The above	named entity	submits this statement for	or the ourn	ose of changing its	renister	red office or regi	stered agent, or hot	th, in the State of	Florida Lam	familiar with	and accept
the obligat	tions of registe	red-agent.	or the purp	obo or orial igning its	, agiotai	or ones or reg.	stored agent, or but	in, in the otate of	riorida. Tarr	ramma with	, and accept
[	-	4.									
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SIGNATURE		printed name of registered agen	and little if and	licable. (NOTE	Register	ed Agent signature reg	uired when reinstating)		DATE		<del></del>
<u>`</u> .«\		<u> </u>		, , , ,							
Filing Fee is \$61.25			9. Election Carr	npaign l	Financing	\$5.00 May 8	\$5.00 May Be Ma		ake check payable to		
Due by May 1, 2007			Trust Fund C	ontribu	tion.						
10	• •	OFFICERS AND D	DECTORS				* POLITICALIS (OL)	1110E0 TO 055	0500 4410 0		*
<del></del>	Lp.	OFFICERS AND DI	RECTORS		11.		ADDITIONS/CH.	ANGES TO OFFI	CERS AND D		
TITLE	D	UOLIAEL		Delete	TITL	-				☐ Change	Addition
NAME	MOTTO, MICHAEL				NAA	-		<b>1</b>			
STREET ADDRESS 424 PEACOCK LANE S					EET ADDRESS		<b>'</b>			Ï	
CITY-ST-ZIP JUPITER, FL 33458				CITY	(-ST-ZIP		//2				
TITLE	VP			☐ Delete	TITL	E	•		-	☐ Change	Addition
NAME	HERMANSEN, CHAD				NAN	AE		$\nu$		<b>–</b> •	
STREET ADDRESS	STREET ADDRESS 6045 LACEWOOD CIRCLE				STR	EET ADDRESS					
CITY-ST-ZIP LAKE WORTH, FL 33462				CITY	Y-ST-ZIP		_ /				
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STREET ADDRESS 6045 LACEWOOD CIRCLE					EET ADDRESS	• •	~ ~	<b>/</b> \			
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NAME	1	(I, GEORGE			NAN	- 1					
STREET ADDRESS	1	EWOOD CIRCLE				EET ADDRESS					
CITY-SI-ZIP		RTH FL 33462				/. ST. 7IP					

12. I hereby certify that the information supplied with this fifing does not qualify for the exemptions contained in Chapter 119, 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 offrustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment withan address, with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

BIELAWASKI, DEBORA

6045 LACEWOOD CIRCLE

LAKE WORTH, FL 33462

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

Daytime Phone #

Change

☐ Change

☐ Addition

Addition