2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P05000108367

1. Entity Name
DIAMONDSDEAL.COM CORP.

Principal Place of Business	Mailing Address
169 E. FLAGLER ST. STE. 905 MIAMI, FL 33131	169 E. FLAGLER ST. STE. 905 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

04302008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
20-3277276	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BUNKER, DAVID
169 E. FLAGLER ST.
STE. 905
MIAMI, FL 33131

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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 _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	BUNKER, DAVID
STREET ADDRESS	169 E. FLAGLER ST., STE. 905
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	D
NAME	LUZON, AMOS
STREET ADDRESS	580 5TH AVE., STE 813
CITY-ST-ZIP	NEW YORK, NY 10036
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000948194
06/02/08-80044-015 150.00

12. I hereby certify that the information supplied with this filing 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 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: _____ Amos Luzon _____   4.15.08   3055199877
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #