

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001362

Entity Name: FUTURE DIAMONDS INC.

FILED
May 19, 2009
Secretary of State

Current Principal Place of Business:

6045 LACE WOOD CIRCLE
LAKE WORTH, FL 33462

New Principal Place of Business:

Current Mailing Address:

6045 LACE WOOD CIRCLE
LAKE WORTH, FL 33462

New Mailing Address:

FEI Number: 65-0899210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS,, FL 33410 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MOTTO, MICHAEL
Address: 424 PEACOCK LANE S
City-St-Zip: JUPITER, FL 33458

Title: VP () Delete
Name: LOPEZ, RAPHEAL DR.
Address: 6045 LACEWOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33462

Title: VP () Delete
Name: NUNEZ, ABEHRHAM
Address: 6045 LACEWOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33462

Title: P () Delete
Name: BIELAWSKI, GEORGE
Address: 6045 LACEWOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33462

Title: TS () Delete
Name: BIELAWASKI, DEBORA
Address: 6045 LACEWOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: BIELAWSKI, DEBORA
Address: 6045 LACEWOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33462

Title: TS (X) Change () Addition
Name: BERGSMA, KERI
Address: 6045 LACEWOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33462

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORA BIELAWSKI

P

05/19/2009

Electronic Signature of Signing Officer or Director

Date