LEHIGH ACRE	5, FL 33970			
Current Mai	ling Address:			
3708 18TH S				
LEHIGH AC	RES, FL 33976 US			
FEI Number: 82-1350477			Certificate of Status Desired: Yes	
Name and Address of Current Registered Agent:				
ABRAHANTES, MAYLISIS DR.				
3708 18TH ST SW LEHIGH ACRES, FL 33976 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.				
	i entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Fi	lorida.
	 MAYLISIS ABRAHANTES MUNOZ 	stered office or regis	tered agent, or both, in the State of Fi	lorida. 02/27/2020
		stered office or regis	tered agent, or both, in the State of Fi	
	E: MAYLISIS ABRAHANTES MUNOZ Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Fi	02/27/2020
SIGNATURE	E: MAYLISIS ABRAHANTES MUNOZ Electronic Signature of Registered Agent	Title	PRESIDENT	02/27/2020
SIGNATURE Officer/Dire	MAYLISIS ABRAHANTES MUNOZ Electronic Signature of Registered Agent ctor Detail :			02/27/2020
SIGNATURE Officer/Dire	MAYLISIS ABRAHANTES MUNOZ Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	PRESIDENT	02/27/2020
SIGNATURE Officer/Dire Title Name	E: MAYLISIS ABRAHANTES MUNOZ Electronic Signature of Registered Agent Ctor Detail : PRESIDENT VEGA, OMAR SR 3708 18TH ST SW	Title Name	PRESIDENT ABRAHANTES , MAYLISIS 3708 18TH ST SW	02/27/2020
SIGNATURE Officer/Dire Title Name Address	E: MAYLISIS ABRAHANTES MUNOZ Electronic Signature of Registered Agent Ctor Detail : PRESIDENT VEGA, OMAR SR 3708 18TH ST SW	Title Name Address	PRESIDENT ABRAHANTES , MAYLISIS 3708 18TH ST SW	02/27/2020
SIGNATURE Officer/Dire Title Name Address	E: MAYLISIS ABRAHANTES MUNOZ Electronic Signature of Registered Agent Ctor Detail : PRESIDENT VEGA, OMAR SR 3708 18TH ST SW	Title Name Address	PRESIDENT ABRAHANTES , MAYLISIS 3708 18TH ST SW	02/27/2020

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MAYLISIS ABRAHANTES MUNOZ

PRESIDENT

02/27/2020

Electronic Signature of Signing Officer/Director Detail

Entity Name: DIAMOND ROUSE SHINE INC

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

3708 18TH ST SW I EHIGH ACRES EL 33076

FILED Feb 27, 2020 **Secretary of State** 9318252081CC

Date