

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 655997

1. Entity Name
DIAMOND CUSTOM MILLWORKS, INC.



FILED
Jan 20, 2006 08:00 AM
Secretary of State

Principal Place of Business
4154 E 10 LANE
HIALEAH, FL 33013

Mailing Address
4154 E 10 LANE
HIALEAH, FL 33013



01122006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1995162

Applied For
☒ Not Applied

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PEREZ, ADDIE
4154 E 10 LANE
HIALEAH, FL 33013

DO NOT WRITE
IN THIS SPACE

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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
PEREZ, ADDIE
4154 E. 10TH LANE
HIALEAH, FL 33013

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
PEREZ, CARLOS
4154 E. 10TH LANE
HIALEAH, FL 33013

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
PEREZ, JESUS
4154 E. 10 LANE
HIALEAH, FL 33013

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000392383
01/24/06-80080-001 150.00

DO NOT WRITE
IN THIS SPACE

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305-688-9832) 01-17-06

Time Phone #