2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE

Jul 12, 2005 08:00 AM Secretary of State DOCUMENT # F01000003091 1. Entity Name R. DIAMOND, INC. Principal Place of Business Mailing Address 6 OFFICE PARK CIRCLE, SUITE 100 6 OFFICE PARK CIRCLE, SUITE 100 BIRMINGHAM, AL 35223 BIRMINGHAM, AL 35223 07052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 63-1098284 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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, 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 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. П Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS 10. TITLE NAME DIAMOND, SAM STREET ADDRESS 3352 HERMITAGE ROAD UODUOO372412 12705-80005-UZU 158.75 CITY-ST-ZIP BIRMINGHAM, AL 35223 TITLE RICHARDS, BRAD NAME 2570 ACTON ROAD, #107 STREET ADDRESS CITY-ST-ZIP BIRMINGHAM, AL 35223 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP N THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

FILED