

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90030 007 ***150.00

DOCUMENT # G50804 1. Entity Name DIAMOND KING ENTERPRISES, INC.			
Principal Place of Business 233 COMMERCIAL BLVD. LAUDERDALE-BY-THE-SEA, FL 33308		Mailing Address 233 COMMERCIAL BLVD. LAUDERDALE-BY-THE-SEA, FL 33308	
2. Principal Place of Business 1471 SW 28 TERR		3. Mailing Address Same	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State DEERFIELD BEACH FL		City & State 	
Zip 33442		Country U.S.	
4. FEI Number 59-2289446		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KLIGLER, DOROTHY 7563 IMPERIAL DR 402D BOCA RATON, FL 33432		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KLIGLER, MICHELLE 7563 IMPERIAL DR., 402D BOCA RATON, FL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD KLIGLER, DOROTHY 7563 IMPERIAL DR., 402D BOCA RATON, FL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KLIGLER, GREGG 233 COMMERCIAL BLVD FT LAUDERDALE, FL 33308	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KLIGLER, GREGG 1471 S.W. 28 TERRACE DEERFIELD BEACH FL 33442	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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.			
SIGNATURE: <i>Gregg J Kligler</i> GREGG J KLIGLER		Date 4/7/05 Daytime Phone # 954-570-8907	