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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT



FLORIDA DEPARTMENT OF STATE

Jun 03 1008 8:00am

	ANN	1998				Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					Secretary of State				
1.	DOCUMENT # H35763 1. Corporation Name Kay Industrial Diamond Corporation											_			
1	Principal Place of Business Mailing Address 1111 West Newport Center Drive Deerfield Beach, FL 33442										DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
2. 21	Principal P	la ce of Busin	iess		28. Mailing Address						12/27/84 4. FEI Number 65-0023196			oplied For	
22	Suite, Apt.	#, etc.			Suite, Apt. #, etc.						5. Certificate of Status Desired		\$8.75		
23	City & Stat	le			City & State						Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	May Be	
24	Zip			Country 30				This corporation owes or has Personal Properly Tax due Jur	paid the cur	rent year Int					
			and Addre	ess of Current F	29 legistered Agr	ent		81	Name		10. Name and Address of New I		Agent		
Michael B. Hornstein 1111 West Newport Center Drive								82			ss (P.O. Box Number is Not Accept	able)			
Deerfield Beach, FL 33442								83			······································				
								84	City		85 Zip Code				
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby a agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE												purpose of apt the appo	changing ill ointment as	s registered registered	
12		Signature typed or printed name of registered agent and title dispolicable (NOTE Registe							al signaturi	e required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	DC (N) 12	
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				ach, FL							rfield Beach, FL		=		
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CIT	Y - ST - ZIP	<u></u>					6.4 CI	TY- \$1	- ZIP	<u>] </u>	*** <u>81.25</u>				
14	. I hereby r	certify that the	a informati	on supplied with	this filing does	not qualify t	or the exe	ampi	ion stat	led in Se	ection 119.07(3)(i). Florida Statutes	I further or	irtify that the	information	

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Nutrition cath; that he information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that ham 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 12 or Block 13 if changed, or on an attachment with an address.