

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003042

Entity Name: DIAMANDIS JEWELERS, LLC

FILED
May 17, 2007
Secretary of State

Current Principal Place of Business:

1313 W. BROADWAY STREET
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

1313 W. BROADWAY STREET
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 20-0713915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BERGER, TOM
1396 WHITE OAK DRIVE
WINTER SPRINGS, FL 32708 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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: BERGER, RENEE C
Address: 1396 WHITE OAK DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VP () Delete
Name: BERGER, THOMAS
Address: 1396 WHITE OAK DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES:

Title: O (X) Change () Addition
Name: BERGER, RENEE C
Address: 1396 WHITE OAK DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: O (X) Change () Addition
Name: BERGER, THOMAS
Address: 1396 WHITE OAK DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RENEE C. BERGER

O

05/17/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date