

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024089

FILED
Jul 13, 2006
Secretary of State

Entity Name: DIAMOND BLADE DISTRIBUTORS, LLC

Current Principal Place of Business:

2717 W. CYPRESS CREEK
SUITE 1133
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

807 BELVEDERE RD
WEST PALM BEACH, FL 33410 US

Current Mailing Address:

2717 W. CYPRESS CREEK
SUITE 1133
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

807 BELVEDERE RD
WEST PALM BEACH, FL 33410 US

FEI Number: 75-3151035 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:

MIRABAL, SONIA A
2717 W. CYPRESS CREEK RD.
SUITE 1133
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

MIRABAL, SONIA A
807 BELVEDERE RD.
WEST PALM BEACH, FL 33410 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: SONIA A. MIRABAL

07/13/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MIRABAL, SONIA
Address: 2717 W. CYPRESS CREEK RD.
City-St-Zip: FT. LAUDERDALE, FL 33309 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MIRABAL, SONIA
Address: 807 BELVEDERE RD.
City-St-Zip: WEST PALM BEACH, FL 33410 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SONIA A. MIRABAL

MGR

07/13/2006

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