## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M31107

Entity Name: AMERICAN DIAMOND EXCHANGE INC.

FILED May 02, 2005 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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4298 SOUTH UNIVERSITY DRIVE 902 S.W. GATLIN BLVD. DAVIE, FL 333283007 PORT ST. LUCIE, FL 34953

**Current Mailing Address: New Mailing Address:** 

4298 SOUTH UNIVERSITY DRIVE 902 S.W.GATLIN BLVD DAVIE, FL 333283007 PORT ST. LUCIE, FL 34953

FEI Number: 59-2671685 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SANDRA, ROEDER SANDRA, ROEDER 4298 SOÚTH UNIVERSITY DRIVE 902 S.W. GATLIN BLVD **DAVIE, FL 33314** PORT ST. LUCIE, FL 34953 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: 05/02/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

ROEDER, SANDRA ROEDER, SANDRA Name: Name: 4298 SOUTH UNIVERSITY DRIVE 902 S.W. GATLIN BLVD. Address: Address: City-St-Zip: **DAVIE, FL 33328** City-St-Zip: PORT ST. LUCIE, FL 34953

( ) Delete Title: VΡ Title: VΡ (X) Change ( ) Addition

ROEDER, TODD Name: Name: ROEDER, TODD 4298 SOUTH UNIVERSITY DRIVE 902 S.W. GATLIN BLVD. Address: Address: DAVIE, FL 33328 PORT ST. LUCIE, FL 34953 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: ( ) Delete

ROEDER, PAM Name: ROEDER, PAM Name:

4298 SOUTH UNIVERSITY DRIVE 902 S.W. GATLIN BLVD. Address: Address:

City-St-Zip: **DAVIE, FL 33328** City-St-Zip: PORT ST. LUCIE, FL 34953

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA ROEDER DP 05/02/2005 The corporation has indicated in accordance with s. 607.193(2)(b), F.S., it did not receive the prior notice. They have requested the late fee be waived.