


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90016 014 ****70.15

DOCUMENT # N99000001362

1. Entity Name
FUTURE DIAMONDS INC.



Principal Place of Business
**6045 LACE WOOD CIRCLE
 LAKE WORTH, FL 33462**

Mailing Address
**6045 LACE WOOD CIRCLE
 LAKE WORTH, FL 33462**

2. Principal Place of Business - No P.O. Box #
6045 LACEWOOD CIR.

3. Mailing Address
Same

Suite, Apt. #, etc.

04132007 Chg-NP CR2E037 (12/06)

City & State
Lake Worth FL

City & State

4. FEI Number
65-0899210

Applied For
 Not Applicable

Zip
33462

Country
FL

Zip
 Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6-Name and Address of Current Registered Agent

**CORPORATE CREATIONS
 941 FOURTH STREET
 MIAMI BEACH, FL 33139**

7-Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
Same

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 _____

**Filing Fee is \$61.25
 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOTTO, MICHAEL 424 PEACOCK LANE S JUPITER, FL 33458	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HERMANSEN, CHAD 6045 LACEWOOD CIRCLE LAKE WORTH, FL 33462	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILSON, CRAIG 6045 LACEWOOD CIRCLE LAKE WORTH, FL 33462	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BIELAWSKI, GEORGE 6045 LACEWOOD CIRCLE LAKE WORTH, FL 33462	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS BIELAWASKI, DEBORA 6045 LACEWOOD CIRCLE LAKE WORTH, FL 33462	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

NO CHANGE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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: *G. Bielawski* **4/3/2007**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #