## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000079885

Entity Name: DIAMOND LIQUORS, INC.

FILED Feb 22, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

17555 COLLINS AVE 16500 COLLINS AVENUE SUITE 2103 SUITE 2051

SUNNY ISLES, FL 33160 SUNNY ISLES, FL 33160

Current Mailing Address: New Mailing Address:

 16500 COLLINS AVE
 18101 COLLINS AVENUE

 SUITE 2151
 SUITE 3501

 SUNNY ISLES, FL 33160
 SUNNY ISLES, FL 33160

FEI Number: 65-1045032 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 STARK, JANA
 STARK, JANA

 17555 COLLINS AVE
 18101 COLLINS AVE

 SUITE 2103
 SUITE 3501

 SUNNY ISLES, FL 33160 US
 SUNNY ISLES, FL 33160 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: JANA STARK 02/22/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: STARK, JANA Name: STARK, JANA

Address: 17555 COLLINS AVE., SUITE 2103 Address: 18101 COLLINS AVE., SUITE 3501

City-St-Zip: SUNNY ISLES, FL 33160 City-St-Zip: SUNNY ISLES, FL 33160

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

Name: Name: KINIGOPOULO, ELENA

 Address:
 Address:
 16500 COLLINS AVE., SUITE 2051

 City-St-Zip:
 City-St-Zip:
 SUNNY ISLES, FL 33160

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 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: ELENA KINIGOPOULO VP 02/22/2007