

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 11, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000114020

1. Entity Name
DIAMOND FOCUS PTY, INC.



Principal Place of Business
6608 WOOD MEADOW LOOP
BRADENTON, FL 34202

Mailing Address
6608 WOOD MEADOW LOOP
BRADENTON, FL 34202



01192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1062188

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

SUTHERLAND, LAWRENCE
6608 WOOD MEADOW LOOP
BRADENTON, FL 34202

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME SALA, MITCH
STREET ADDRESS UNIT 35 NO 7 ANELLA AVE CASTLE HILL
CITY - ST - ZIP NSW 2153 AUSTRALIA,

TITLE D
NAME SALA, DEIDRE
STREET ADDRESS UNIT 35 NO 7 ANELLA AVE CASTLE HILL
CITY - ST - ZIP NSW 2153 AUSTRALIA,

TITLE T
NAME SUTHERLAND, LAWRENCE
STREET ADDRESS 6608 WOOD MEADOW LOOP
CITY - ST - ZIP BRADENTON, FL 34202

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

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02/11/05-80061-004 1SD.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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:

Lawrence Sutherland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-05 941-727-0123

Date

Daytime Phone #