

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P01000106224

1. Entity Name  
BLUE DIAMOND ENTERPRISES, INC.



Principal Place of Business  
8208 BRETON CIR.  
FORT MYERS, FL 33912

Mailing Address  
PO BOX 61091  
FORT MYERS, FL 33906

FILED  
05 APR -7 PM 5:57  
SAC, TALLAHASSEE, FLORIDA



**DO NOT WRITE IN THIS SPACE**

03052005 No Chg-P CR2E034 (10/03)

4. FEI Number 71-9755235	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

KRUGER, EDWARD J SR.  
8208 BRETON CIR.  
FT. MYERS, FL 33912

**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 \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May 8, 2005 000054038316  
Added to Fees 03/09/05--01014--014 \*\*150.00

10. OFFICERS AND DIRECTORS

TITLE P  
NAME KRUGER, EDWARD J SR.  
STREET ADDRESS 8208 BRETON CIR.  
CITY-ST-ZIP FT. MYERS, FL 33912

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:** *Edward Kruger*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-11-05

Date

Daytime Phone #

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IN THIS SPACE**