2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126640

Entity Name: DIAMANTE DESIGNS INC.

FILED Feb 10, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6102 SAVOY CIRCLE 19239 N DALE MABRY HWY LUTZ, FL 33558

#140

LUTZ, FL 33548

Current Mailing Address: New Mailing Address:

6102 SAVOY CIRCLE 19239 N DALE MABRY HWY LUTZ, FL 33558

#140

LUTZ, FL 33548

FEI Number: 76-0745359 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:

CIFUENTES, ADRIANA CIFUENTES, ADRIANA 6102 SAVOY CIRCLE 19239 N DALE MABRY HWY LUTZ, FL 33558 #140

LUTZ, FL 33548 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: ADRIANA CIFUENTES 02/10/2008

> 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

CIFUENTES, ADRIANA CIFUENTES, ADRIANA Name: Name:

6102 SAVOY CIRCLE Address: 19239 N DALE MABRY HWY #140 Address:

City-St-Zip: LUTZ, FL 33558 City-St-Zip: LUTZ, FL 33548

I hereby certify that the information supplied with this filing does not qualify 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: ADRIANA CIFUENTES 02/10/2008 DIR

Electronic Signature of Signing Officer or Director

Date