



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90027 010 ***150.00

DOCUMENT # P03000046165 1. Entity Name DIAMOND BUILDING SERVICES, INC.					
Principal Place of Business 1393 NW 10TH ST HOMESTEAD, FL 33030			Mailing Address 1393 NW 10TH ST HOMESTEAD, FL 33030		
2. Principal Place of Business 607 NW 7th Ave Suite, Apt. #, etc.		3. Mailing Address 607 NW 7th Ave Suite, Apt. #, etc.			
City & State Homestead, FL Zip 33030		City & State Homestead, FL Zip 33030		4. FEI Number 91-2194737	
Country US		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORONA, JORGE 1393 NW 10TH ST HOMESTEAD, FL 33030				7. Name and Address of New Registered Agent Name Corona Jorge Street Address (P.O. Box Number is Not Acceptable) 607 NW 7th Ave City Homestead FL Zip Code 33030	
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: <u>Jorge Corona</u> DATE: <u>03/01/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDS JORGE, CORONA 1393 NW 10TH ST HOMESTEAD, FL	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDS Jorge Corona 607 NW 7th Ave Homestead, FL 33030
<input type="checkbox"/> Change <input type="checkbox"/> Addition		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
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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 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: <u>Jorge Corona</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>03/01/06</u> Daytime Phone #: <u>(786) 298 6628</u>		