2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067288

Entity Name: DIAMOND 93, INC

FILED Apr 29, 2008 Secretary of State

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Current Principal Place of Business:				New Princ	ipal Place o	of Business:	
10961 NW 5 COURT PLANTATION, FL 33324				10301 SWEET BAY STREET PLANTATION, FL 33324			
Current Mailing Address:				New Mailing Address:			
10961 NW 5 COURT PLANTATION, FL 33324				10301 SWEET BAY STREET PLANTATION, FL 33324			
FEI Number:	27-0075538	FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name					me and Address of New Registered Agent:		
RUIZ, NAD 135 SW 22 MIAMI, FL	AVE						
The above in the State		ıbmits this statement for the ρ	ourpose of	changing it	s registered	office or registered agent, or both,	
SIGNATUR	RE:						
	Electronic	Signature of Registered Age	ent			Date	
Election Carr	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () I GAGLIARDI, VAL 10961 NW 5 CO PLANTATION, FL	JRT		Title: Name: Address: City-St-Zip:	GAGLIARDI, Ì	T BAY STREET	
Title: Name: Address: City-St-Zip:	VD () I GAGLIARDI, DEN 10961 NW 5 COI PLANTATION, FL	JRT		Title: Name: Address: City-St-Zip:	GAGLIARDI, I	T BAY STREET	
Title: Name: Address: City-St-Zip:	D () I GONCALVES, PA 6621 SEGOVIA O PEMBROKE PIN	CIRCLE NORTH		Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I GAGLIARDI, RO: 6621 SEGOVIA O PEMBROKE PIN	CIRCLE NORTH		Title: Name: Address: City-St-Zip:	(() Change () Addition	

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: DENISE GAGLIARDI VD 04/29/2008