## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # P03000105204**

DIAMOND'S ELECTRIC SIGNS, INC.



Principal Place of Business

230 POWER COURT

150

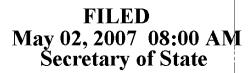
SANFORD, FL 32771

Mailing Address

230 POWER COURT

150

SANFORD, FL 32771





## DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 04242007 No Chg-P Applied For 4. FEI Number 20-0240115 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ERICA FISK 230 POWER CT SUITE 150 SANFORD, FL 32771

## DO NOT WRITE IN THIS SPACE

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8. The above the obligat	named entity submits this statement for the plions of registered agent	urpose of changing its registere	ed office or r	egistered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title it	f ennicobia (NOTE: Registoro	d Agent eloggicus	required when reinstating)	DATE
	Signature, typod or printed name or registered agent and little in	approade (NOTE Neglislate)	a Agent signature	, reduies M. O. Touristing)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution			U000007E2072
10.	OFFICERS AND DIREC	CTORS	1	,	05/22/07-80038-012 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FISK, ERICA J 150 SANDY OAKS PLACE LONGWOOD, FL 32779				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY- ST-ZIP				IN T	HIS SPACE
DILE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. Thereby 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

CITY-ST-ZIP