

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000113095

FILED
Apr 10, 2004
Secretary of State

Entity Name: DIAMOND QUALITY SERVICES USA, INC.

Current Principal Place of Business:

C/O CIFUENTES-MARRERO, P.A.
1580 SAWGRASS CORP. PKWY., SUITE 130
SUNRISE, FL 33323

New Principal Place of Business:

185 SUTTER DRIVE
CLERMONT, FL 34711

Current Mailing Address:

C/O CIFUENTES-MARRERO, P.A.
1580 SAWGRASS CORP. PKWY., SUITE 130
SUNRISE, FL 33323

New Mailing Address:

185 SUTTER DRIVE
CLERMONT, FL 34711

FEI Number: 20-0677243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIFUENTES, MARIA C
1580 SAWGRASS CORP. PKWY., SUITE 130
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

UZCATEGUI, GERMAN A
13524 TURTLE MARSH LOOP
638
ORLANDO, FL 32837 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: GERMAN UZCATEGUI

04/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ORDOÑEZ, MARIELYS
Address: C/O CIFUENTES-MARRERO, P.A. 1580 SAWGRASS
City-St-Zip: CORP. PKWY, SUITE 130, SUNRI, FL 33323

Title: VP,S () Delete
Name: ORDOÑEZ, ADAN
Address: C/O CIFUENTES-MARRERO, P.A. 1580 SAWGRASS
City-St-Zip: CORP. PKWY, SUITE 130, SUNRI, FL 33323

Title: T () Delete
Name: ORDOÑEZ, JUAN
Address: C/O CIFUENTES-MARRERO, P.A. 1580 SAWGRASS
City-St-Zip: CORP. PKWY, SUITE 130, SUNRI, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ADAN ORDONEZ

VP,S

04/10/2004

Electronic Signature of Signing Officer or Director

Date