

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000113095

FILED  
Apr 23, 2005  
Secretary of State

Entity Name: DIAMOND QUALITY SERVICES USA, INC.

## Current Principal Place of Business:

185 SUTTER DRIVE  
CLERMONT, FL 34711

## New Principal Place of Business:

886 SCENIC VIEW CIRCLE  
MINNEOLA, FL 34715

## Current Mailing Address:

185 SUTTER DRIVE  
CLERMONT, FL 34711

## New Mailing Address:

886 SCENIC VIEW CIRCLE  
MINNEOLA, FL 34715

FEI Number: 20-0677243

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

UZCATEGUI, GERMAN A  
8838 ABBOSTBURY DRIVE  
WINDERMERE, FL 34786 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

04/23/2005

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: P (X) Change ( ) Addition  
Name: ORDOÑEZ, MARIELYS  
Address: 886 SCENIC VIEW CIRCLE  
City-St-Zip: MINNEOLA, FL 34715

Title: VP,S (X) Change ( ) Addition  
Name: ORDOÑEZ, ADAN  
Address: 886 SCENIC VIEW CIRCLE  
City-St-Zip: MINNEOLA, FL 34715

Title: T (X) Change ( ) Addition  
Name: ORDOÑEZ, JUAN  
Address: 886 SCENIC VIEW CIRCLE  
City-St-Zip: MINNEOLA, FL 34715

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

04/23/2005

Electronic Signature of Signing Officer or Director

Date