2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000113095

Entity Name: DIAMOND QUALITY SERVICES USA, INC.

FILED Apr 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

886 SCENIC VIEW CIRCLE 195 DAKOTA AVE

MINNEOLA, FL 34715 GROVELAND, FL 34736

Current Mailing Address: New Mailing Address:

886 SCENIC VIEW CIRCLE 195 DAKOTA AVE

MINNEOLA, FL 34715 GROVELAND, FL 34736

FEI Number: 20-0677243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

UZCATEGUI, GERMAN A
8838 ABBOSTBURY DRIVE
WINDERMERE, FL 34786
US
UZCATEGUI, GERMAN A
13644 BEAUREGARD PL
GROVELAND, FL 34736
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 04/18/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P () Delete Title: P (X) Change () Addition e: ORDOÑEZ, MARIELYS Name: ORDOÑEZ, MARIELYS

 Name:
 ORDOÑEZ, MARIELYS
 Name:
 ORDOÑEZ, MARIELYS

 Address:
 886 SCENIC VIEW CIRCLE
 Address:
 195 DAKOTA AVE

 City-St-Zip:
 MINNEOLA, FL 34715
 City-St-Zip:
 GROVELAND, FL 34736

Title: VP,S () Delete Title: VP,S (X) Change () Addition

 Name:
 ORDOÑEZ, ADAN
 Name:
 ORDOÑEZ, ADAN

 Address:
 886 SCENIC VIEW CIRCLE
 Address:
 195 DAKOTA AVE

 City-St-Zip:
 MINNEOLA, FL 34715
 City-St-Zip:
 GROVELAND, FL 34736

Title: T () Delete Title: T (X) Change () Addition

 Name:
 ORDOÑEZ, JUÁN
 Name:
 ORDOÑEZ, JUÁN

 Address:
 886 SCENIC VIEW CIRCLE
 Address:
 320 ANORAK ST

 City-St-Zip:
 MINNEOLA, FL 34715
 City-St-Zip:
 GROVELAND, FL 34736

I hereby certify that the information supplied with this filing does not qualify for the 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: ADAN ORDONEZ VP 04/18/2007