

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000116537

Entity Name: DIAMOND DUST, INC.

FILED
Oct 30, 2006
Secretary of State

Current Principal Place of Business:

16090 CORTEZ BOULEVARD
BROOKSVILLE, FL 34613 US

New Principal Place of Business:

Current Mailing Address:

27315 POPIEL ROAD
BROOKSVILLE, FL 34602 US

New Mailing Address:

16090 CORTEZ BOULEVARD
BROOKSVILLE, FL 34613 US

FEI Number: 20-1472685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M & L ACCOUNTING
1389 HAULOVER AVENUE
SPRING HILL, FL 34608 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P,S () Delete
Name: BROWN, LISA A
Address: 27315 POPIEL ROAD
City-St-Zip: BROOKSVILLE, FL 34602 US

Title: VP,D () Delete
Name: BROWN, LISA A
Address: 8181 WISHBONE RD
City-St-Zip: BROOKSVILLE, FL 34602 US

Title: D,T () Delete
Name: BROWN, LISA A
Address: 27315 POPIEL ROAD
City-St-Zip: BROOKSVILLE, FL 34602 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: MORELAND, KATHY
Address: 16090 CORTEZ BOULEVARD
City-St-Zip: BROOKSVILLE, FL 34613 US

Title: VP,D (X) Change () Addition
Name: MORELAND, KATHY
Address: 16090 CORTEZ BOULEVARD
City-St-Zip: BROOKSVILLE, FL 34613 US

Title: D,T (X) Change () Addition
Name: MORELAND, KATHY
Address: 16090 CORTEZ BOULEVARD
City-St-Zip: BROOKSVILLE, FL 34613 US

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: KATHY MORELAND

P.S

10/30/2006

Electronic Signature of Signing Officer or Director

Date