



2006 FOR PROFIT CORPORATION ANNUAL REPORT

5/1

FILED
Jun 09, 2006 8:00 am
Secretary of State

05-01-2006 90481 002 ***150.00

DOCUMENT # P05000018386			
1. Entity Name DIAMOND TRADING COMPANY OF SARASOTA INC.			
Principal Place of Business 5370 SOUTHERLY WAY SARASOTA, FL 34232 US		Mailing Address 5370 SOUTHERLY WAY SARASOTA, FL 34232 US	
2. Principal Place of Business 9805 N.W. 52ND STREET Suite, Apt. #, etc. 520		3. Mailing Address 9805 N.W. 52ND STREET Suite, Apt. #, etc. 520	
City & State DORAL FL		City & State DORAL FL	
Zip 33178	Country USA	Zip 33178	Country USA
4. FEI Number 203286867		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GLUCHOV, MARC 5370 SOUTHERLY WAY SARASOTA FL 34232		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 9805 NW 52ND STREET City DORAL FL Zip Code 33178	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature: typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$850.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GLUCHOV, MARC 5370 SOUTHERLY WAY SARASOTA, FL 34232 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9805 NW 52ND STREET #520 DORAL FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GLUCHOV, SHERRY W 5370 SOUTHERLY WAY SARASOTA, FL 34232 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9805 NW 52ND STREET DORAL FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GLUCHOV, JESSICA N 1134 SHAFFER TRAIL OVIEDO, FL 32765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GLUCHOV, ANDREW 1134 SHAFFER TRAIL OVIEDO, FL 32765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLUCHOV, LOUIS J 1134 SHAFFER TRAIL OVIEDO, FL 32765 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby 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 		MARC GLUCHOV PRESIDENT 4-21-06 786-641-8486	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	