

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000162855

FILED  
Dec 19, 2008  
Secretary of State

**Entity Name:** DIAMOND MANAGEMENT SERVICES OF NAPLES, INC.

**Current Principal Place of Business:**

2316 PINE RIDGE RD.  
344  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

2316 PINE RIDGE RD.  
344  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 20-3938794

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 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: TINA MAKI

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: VELAZQUEZ, LEONARDO  
Address: 240 QUAIL FOREST BLVD. #206  
City-St-Zip: NAPLES, FL 34105

Title: VDST ( ) Delete  
Name: CUESTA GARCIA, IRIS  
Address: 240 QUAIL FOREST BLVD. #206  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: VELAZQUEZ, LEONARDO  
Address: 3615 66TH ST W  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VDST (X) Change ( ) Addition  
Name: CUESTA GARCIA, IRIS  
Address: 3615 66TH ST W  
City-St-Zip: LEHIGH, FL 33971

I hereby certify that the information supplied with this filing does not qualify 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: LEONARDO VELAZQUEZ

P

12/19/2008

Electronic Signature of Signing Officer or Director

Date