## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Mar 16, 2006 8:00 am Secretary of State

1. Entity Name DIAMOND K CONSTRUCTION INC.						03-16-2006	5 90221 036 °	***15	0.00	
Principal Plac 1609 SW DY PALM CITY, F	ER PT RD	Mailing Address P.O. BOX 1345 PALM CITY, FL 34991					500028	889		
2. Principal P	face of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01302006	Chg-P	CR2E034 (1			
City & State		City & State	City & State		4. FEI Numbe	st.			plied For	
Zip Country		Zip	Zip Country		65-0469	9374 of Status Desired	F] \$8.7	Not 75 Addi	t Applicable itional	
	6. Name and Address of Curren	t Registered Agent	<del></del>		<u> </u>	Address of New F	Fee F	Required	<u> </u>	
KONIETZKO, PHILIP C				Name						
1609 SW DYER PT RD PALM CITY, FL 34990			Stree	Street Address (P.O. Box Number is Not Acceptable)						
	,,, = = ,,,,,,									
0 V		( ) ( ) ( ) ( ) ( ) ( )	City		<del></del>			ip Code		
	named entity submits this statement lions of registered agent.	for the purpose of changing its	registered office	e or register	ed agent, or bot	h, in the State of Fi	orida. Tam tamilia	ar with, a	and accept	
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NOTI	E: Registered Agent sig	nature required	I when reinstating)		DATE			
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550	9. Election Campa Trust Fund Cont			.00 May Be ed to Fees	,		-		
10.	OFFICERS AND	D DIRECTORS	11.			CHANGES TO OFF	ICERS AND DIRE	CTORS	IN 11	
TITLE NAME	PST KONIETZKO, PHILIP C	☐ Delete	TITLE NAME		lip Kon	ietzko	<b>X</b> (	Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1609 SW DYER PT RD PALM CITY, FL 34990		STREET ADDRES	is 13:	3 Seal	ietzko gwelwa g FC	y 3 <b>4</b> 990 -	-/72	Ą	
TITLE	VP	☐ Delete	TITLE	- $VF$	, ,	•		Change	Addition	
NAME STREET ADDRESS	KONIETZKO, MARIA C 1609 SW DYER PT RD		NAME STREET ADDRES	8 <i>ma</i>	ria Kon 13 Seag	ietzko uli way	,			
CITY-ST-ZIP	PALM CITY, FL 34990	<u> </u>	CITY-ST-ZIP	Pal		PC 3	4990-1	729	7	
TITLE NAME	V SHAPIRO, BARRY	Delete	TITLE NAME		/			Change	☐ Addition	
STREET ADDRESS	120 LEHANE TERRACE #204		STREET ADDRES	is						
CITY-ST-ZIP	NORTH PALM BEACH, FL 334	O8	CITY-ST-ZIP	-		<del>-</del>		· · · · · · · · · · · · · · · · · · ·	- Latin-	
NAME		□ Derete	NAME				U.	Change	☐ Addition	
CITY-ST-ZIP	-		STREET ADDRES CITY-ST-ZIP	SS					-	
TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Delete	TITLE					Change -	Addition	
NAME STREET ADDRESS			NAME STREET ADDRES	SS						
CITY-ST-ZIP			CITY-ST-ZIP		<u> </u>					
TITLE NAME		☐ Delete	TITLE NAME					Change	☐ Addition	
STREET ADDRESS			STREET ADDRES	ss						
12. Thereby	Certify that the information supplied wi	th this filing does not qualify to	CITY-ST-ZIP or the exemption	s contained	l in Chapter 119	. Florida Statutes 1	further certify the	at the in	formation	
indicated of the cor	certify that the information supplied will on this report or supplemental report poration or the receiver or trustee error or on an attachment with an address.	owered to execute this port	ny signature sha as required by 0	II have the s Chapter 607	same legal effec 7. Florida Statute	t as if made under s; and that my nam	oath; that I am an le appears in Bloc	officer o	or director Block 11 if	
	1///	, with all off or the empoyered.	- DL	1 11	in the	6 3/13/	h.c -		ام محد	
SIGNAT	URE: SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	, 1601	n!e! 27	Date / // 3/	10 6 773 Daytime	)- 260 Phone #	7-2978	
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