2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 25, 2005 08:00 AM Secretary of State **DOCUMENT # P94000027337** DIAMOND HOME CLEANING INC. Principal Place of Business Mailing Address 9407 ELDRIDGE ROAD 9407 ELDRIDGE ROAD SPRING HILL, FL 34608 SPRING HILL, FL 34608 No Chg-P CR2E034 (10/03) 04212005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3247760 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LITTLE, RUSSELL E SR. DO NOT WRITE 9407 ELDRIDGE ROAD SPRING HILL, FL 34608 IN THIS SPACE 3. 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 expricable (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. П Added to Fees 10. OFFICERS AND DIRECTORS 7151 E NAME RUSSELL E. LITTLE 9407 ELDRIDGE RD STREET ADDRESS CATY-ST-ZIP SPRING HILL, FL TITLE U00000329060 04/25/05-80101-019 150.00 NAME **EVELYN LITTLE** STREET ADDRESS 9407 ELDRIDGE RD. CITY-ST-ZIP SPRING HILL, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE MANE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

PED OR PRINTED NAME OF SIGNING OFFICER OR D