## **2004 FOR PROFIT CORPORATION**

SIGNATURE:

May 03, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P94000035922 DIAMOND CARS INC. Principal Place of Business Mailing Address 7231 S HWY 301 7231 S HWY 301 RIVERVIEW, FL 32569 RIVERVIEW, FL 32569 115 No Chg-P CR2E034 (10/03) 04222004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3239153 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SMITH, DEAN G DO NOT WRITE 9817 CARR ROAD RIVERVIEW, FL 33569 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME SMITH, DEAN G 9817 CARR ROAD STREET ADDRESS RIVERVIEW, FL 33569 CITY-ST-ZP U00000154899 05/05/04-80016-006 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Wis filing does for qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information frue and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director wered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if its export as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if 12. Thereby certify that the information of indicated on this report or supplement of the corporation of the receiver or changed, or on an attachment with

NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**