FILED

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P96000032417 **DOCUMENT#**

1. Entity Name

DIAMOND H AIR & HEAT, INC.

			_									
Principal Place of Business 7105 SE 110 TH ST RD BELLEVIEW FL 34420 US				Mailing Address 10050 SE 139TH PLACE SUMMERFIELD FL 34491								
2. Principal Place of Business				3. Mailing Address				,	 			
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State				City & State				FEI Number 59-3371	941	_ 	plied For t Applicable	
Zip	Country			Zip Coun			5. Certificate of Status Desired			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent								Name and Address of No				
LICOINDOTUAN IANEO						Name						
HIGGINBOTHAM, JAMES 10050 SE 139TH PLACE				Street Addres			dress (P.O. E	(P.O. Box Number is Not Acceptable)				
SUMMERFIELD FL 34491												
•									FL	Zip Code		
the obligati		y submits this statement for ered agent.	the purp	ose of changing its	registered	d office or re	egistered ag	gent, or both, in the State of	of Florida. I am f	amiliar with,	and accept	
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if app	licable. (NOTE	: Registered	Agent signature	required when r	reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaig Trust Fund Contrib			O May Be to Fees	
10.		OFFICERS AND	DIRECTO	RS	11.		ΙA	DDITIONS/CHANGES TO	OFFICERS AND	DIRECTORS	3 IN 11	
ITLE NAME STREET ADDRESS STY-ST-ZIP	10050 SE	THAM, JAMES 139TH PLACE BELD FL 34491		☐ Delete	TITLE NAME STREET CITY-S	t address St-zip .	,			☐ Change	Addition Addition	
IITLE NAME STREET ADDRESS CITY-ST-ZIP	10050 SE	THAM, VIRIGINIA 139TH PLACE IELD FL 34491		☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS				Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	11511 SE	OTHAM, DOUGLAS 123 STREET N FL 34420	. ;	☐ Delete	TITLE 'NAME STREET CITY-S	T ADDRESS	ا المحمد	<u> </u>	*\ _# *, ##	Change	Addition	
TITLE NAME STREET ADDRESS DITY-ST-ZIP		DENNIS 157 LANE ON FL 34432		□ Delete	TITLE NAME STREET CITY-S	T ADDRESS				Change	☐ Addition	
TITLE NAME STREET ADDRESS SITY-ST-ZIP				☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS				Change	Addition	
TTLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS				☐ Change	Addition	

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 reference 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:

(352) 307-7175