Apr 23, 2003 8:00 am Secretary of State 04-23-2003 90250 029 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P98000059086

DOCUMENT #

1. Entity Name

QUALITY DIAMOND PROPERTIES, INC.									04-25-2005	70250	029 130		
Principal Place of Business 2280 10TH ST SE LARGO FL 33771 US			2280	Mailing Address 2280 10TH ST SE LARGO FL 33771 US									
2. Principal	Place of Busi	ness	3. Mai	3. Mailing Address									
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State			City	City & State				9950037581			pplied For		
Zip Country			Zip	Zip Coui			5. Certificate of Status Desired				\$8.75 Ad		
	6. Name	. Name and Address of Current Re		gistered Agent				7. Name and Address of New Registered Age				ent	
-						Name							
	, ROBERT I	F , , ?		Str			Street Address (P.O. Box Number is Not Acceptable)						
2280 10TI		,											
LARGO FI	L 33771	,											
						City				F	Zip Cod	le	
	ations of regis	ty submits this statement tered agent.	t for the purp	oose of changing its	register	ed office or re	egistered	agent, or both, ir	the State of Fl	orida. I ar	n familiar with,	and accept	
SIGNATORE		or printêd name of registered ag	ent and title if app	plicable. (NOTE	: Registere	d Agent signature	required wi	hen reinstating)		DATE	- 101		
Afte	er May 1, 20	!! FEE IS \$150.00 03 Fee will be \$550.0 o Florida Department							n Campaign Fi und Contribution	-		00 May Be d to Fees	
10.		OFFICERS AN	D DIRECTO	PRS	11.			ADDITIONS/CH	ANGES TO OF	FICERS AN	ND DIRECTOR	(S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS DIAMOND, 2280 10TH LARGO FL			☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT	RÓBERT F II I ST SE		☐ Delete	TITLE NAM STRE						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete				w., ~		ىيە ئاسىمىدىد	Change -	Addition-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		- 1			***		☐ Change	Addition	
TITLE NAME STREET ADDRESS				☐ Delete	TITLE						☐ 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 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

