## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 13, 2007 08:00 A Secretary of State DOCUMENT # P99000043690 DIAMOND JUPITER COMMUNICATIONS, INC. Principal Place of Business Mailing Address 6252 WINDING LAKE DRIVE 6252 WINDING LAKE DRIVE JUPITER, FL 33458-3787 JUPITER, FL 33458-3787 04012007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0919686 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DRESCHER, DAVID DO NOT WRITE 6252 WINDING LAKE DR. JUPITER, FL 33458 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. the obligations of 4/11/2007 SIGNATURE (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME DRESCHER, DAVID STREET ADDRESS 6252 WINDING LAKE DRIVE CITY-ST-ZIP JUPITER, FL 334583787 U00000703624 TITLE DRESCHER, ELIZABETH 04/20/07~80148-010 150.00 NAME STREET ADDRESS 6252 WINDING LAKE DRIVE JUPITER, FL 334583787 CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP

IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 withjan address, with all the empowered.

SIGNATURE:

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED