2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 03, 2005 08:00 AM Secretary of State DOCUMENT # P99000103509 1. Entity Name DIAMOND PETROLEUM, INC. Principal Place of Business Mailing Address 2699 W. OAKLAND PARK 2699 W. OAKLAND PARK 2699 2699 OAKLAND PARK, FL 33311 OAKLAND PARK, FL 33311 01172005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0983617 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE VALLYANI, NOOR 2699 W. OAKLAND PARK OAKLAND BLVD, FL 33311 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. NOOK VALLYAM! RESIDENT SIGNATURE. (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. THILE NAME VALLYANI, NOOR STREET ADDRESS 2699 W. OAKLAND PARK U00000213348 CITY-ST-ZIP OAKLAND BLVD, FL 33311 02/03/05-80067-007 150.00 THLE VALLYANI, ROZINA MAME STREET ADDRESS 2699 W. OAKLAND PARK CITY-ST-ZIP OAKLAND PARK, FL 33309 TITLE VALLYANI, NIZAR NAME STREET ADDRESS 2699 W. OAKLAND PARK DO NOT WRITE OAKLAND BLVD, FL 33309 CITY-ST-ZIP TITLE IN THIS SPACE MAME VALLYANI, MOHAMMED 2699 W. OAKLAND PARK STREET ADDRESS OAKLAND BLVD, FL 33309 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST-7IP TITLE NAME

12. Thereby 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.

STREET ADDRESS CITY-ST-ZIP

> NOOR VALLYAN, PRESIDENT R PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

FILED