

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K45152

**FILED**  
**Apr 26, 2005**  
**Secretary of State**

**Entity Name:** CARIBBEAN GEMS AND JEWELRY, INC.

**Current Principal Place of Business:**

36 NE 1ST ST.  
#141  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

36 NE 1ST ST.  
#141  
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** 65-0080342      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEVIVO, ITALO M.  
36 NE 1ST STREET 141  
MIAMI, FL 33132 US

**Name and Address of New Registered Agent:**

DE VIVO, ITALO M  
36 NE 1ST STREET  
141  
MIAMI, FL 33132 US

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.

SIGNATURE: ITALO M DE VIVO

04/26/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DEVIVO, ITALO M.,  
Address: 1 N.E. 1ST ST  
City-St-Zip: MIAMI, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P,D (X) Change ( ) Addition  
Name: DE VIVO, ITALO M  
Address: 14263 SW 108 STREET  
City-St-Zip: MIAMI, FL 33186

Title: V,D ( ) Change (X) Addition  
Name: DE VIVO, ITALO  
Address: 10890 SW 153 COURT  
City-St-Zip: MIAMI, FL 33196

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ITALO M DE VIVO

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date