

**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 08, 2004  
Secretary of State**

DOCUMENT# L01000001521

Entity Name: ARTLINKS JEWELRY, LLC

**Current Principal Place of Business:**

1975 LAS COLINAS WAY  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

1975 LAS COLINAS WAY  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

FEI Number: 65-1068624      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BERG ROLLIN, EILEEN  
1975 LAS COLINAS WAY  
CORAL SPRINGS, FL 33071

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: P ( ) Delete  
Name: BERGROLLIN, EILEEN  
Address: 1975 LAS COLINAS WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: P ( ) Delete  
Name: ROLLIN, KENNETH  
Address: 1975 LAS COLINAS WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ROLLIN, EILEEN B  
Address: 1975 LAS COLINAS WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGR (X) Change ( ) Addition  
Name: ROLLIN, KENNETH  
Address: 1975 LAS COLINAS WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EILEEN B. ROLLIN

MGRN

01/08/2004

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date