

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M94104

FILED
Jun 30, 2005
Secretary of State

Entity Name: JEWELCOR CONSULTING, INC.

Current Principal Place of Business:

249 ROYAL PALM WAY.
STE. 303J
PALM BEACH, FL 33480

New Principal Place of Business:

249 ROYAL PALM WAY
STE. 303J
PALM BEACH, FL 33480

Current Mailing Address:

100 NORTH WILKES BARRE BLVD
4TH FLOOR
WILKES BARRE, PA 18702

New Mailing Address:

FEI Number: 65-0066511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOLTZMAN, SEYMOUR,
Address: 100 NORTH WILKES BARRE BLVD
City-St-Zip: WILKES BARRE, PA

Title: DS () Delete
Name: SCIANDRA, MARIA
Address: 100 N. WILKES-BARRE BLVD
City-St-Zip: WILKES BARRE, PA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARIA SCIANDRA

DS

06/30/2005

Electronic Signature of Signing Officer or Director

_____ Date