

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000009287

1. Entity Name

GASTON JEWELRY STUDIO, INC.

FILED
Sep 19, 2000 8:00 am
Secretary of State

09-19-2000 90001 009 ***150.00

Principal Place of Business
36 NE STREET #851
MIAMI, FLORIDA 33132

Mailing Address
36 NE 1st. STREET
MIAMI, FL. 33132



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0936769		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☒ \$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
RIVES, GASTON 36 NE 1st. STREET #851 MIAMI, FLORIDA 33132		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒	FILE NOW!! FEE IS \$100.00 APR. MAY 4, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P, S NAME GASTON RIVES STREET ADDRESS 36 NE 1st. STREET #851 CITY-ST-ZIP MIAMI, FLORIDA 33132	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

13. I hereby 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 11 or Block 12 or changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-14-00

RAFAEL IGLESIAS C.P.A.

Attachment
p 99 0000 9287
801 MADRID ST. #204
CORAL GABLES, FLORIDA 33134
AU079592

Phone 305-446-8422
Fax 305-569-9118

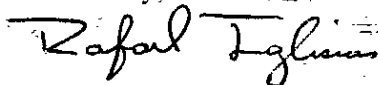
September 15, 2000

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, Fl. 32302-1500

Dear Sirs,

Enclosed is Year 2000 Uniform Business Report for Gaston Jewelry Studio, Inc. The original form was never received. Gaston Jewelry Studio, Inc., is a first-year corporation and my client was not aware of the required filing. I noticed the non-filing while performing write-up work. The officers of the corporation have been made aware of the yearly-filing requirement. This error will not be repeated. Therefore, we respectfully request the abatement the additional filing fee.

Sincerely,



Rafael Iglesias