2006 FOR PROFIT CORPORATION ANNUAL REPORT

 I hereby certify that the information sup indicated on this report or supplements of the corporation or the receiver or changed, or on an attachment with

SIGNATURE:

Feb 10, 2006 08:00 AN DOCUMENT # P99000014303 **Secretary of State** 1. Entity Name LEGEND OF JEWELRY, INC. Principal Place of Business Mailing Address 2845 NE 185 ST, APT 908 3015 NW 79TH STREET #F 69-70 AVENTURA, FL 33180 MIAMI, FL 33147 02082006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 65-0894502 \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent PEREZ, BEJAR & ASSOCIATES P.A. DO NOT WRITE 13935 N. 1ST AVE MIAMI, FL 33168 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE BRENTON, YONG NAN NAME STREET ADDRESS 2845 NE 185TH ST #908 CITY-ST-ZIP AVENTURA, FL 33180 TITLE H00000429186 KIM, YOUNG KU NAME 02/21/06-80072-019 150. STREET ADDRESS 2845 NE 185TH ST. #908 CITY-ST-ZIP AVENTURA, FL 33180 TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP filing does not qualify for the exemptions confained in Chapter 119, Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if

other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED