

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116908

Entity Name: QUEEN'S JEWELRY, LLC

FILED
Mar 28, 2008
Secretary of State

Current Principal Place of Business:

800 S DOUGLAS RD
SUITE 105
CORAL GABLES, FL 33134

New Principal Place of Business:

3300 NE 191ST STREET
AVENTURA, FL 33180

Current Mailing Address:

800 S DOUGLAS RD
SUITE 105
CORAL GABLES, FL 33134

New Mailing Address:

3300 NE 191ST STREET
AVENTURA, FL 33180

FEI Number: 42-1721805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARBOSA, JULIO C ESQ.
800 S DOUGLAS RD
SUITE 105
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

EAGLE TAX REPRESENTATION, CORP
4641 N STATE ROAD 7
SUITE 18
COCONUT CREEK, FL 33073 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: PAULO OLIVEIRA

03/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SILVEIRA, DELAMARE N JR.
Address: R. BARAO DE PARANAPIACABA, 40 ?3?ANDAR
City-St-Zip: SAO PAULO, SP 01004-000 BR

Title: MGRM () Delete
Name: SILVEIRA, SUZILEI G
Address: R. BARAO DE PARANAPIACABA, 40 ?3?ANDAR
City-St-Zip: SAO PAULO, SP 01004-000 BR

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, 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: DELAMARE N SILVEIRA JR

MGRM

03/28/2008

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