

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 438411

FILED  
Feb 01, 2006  
Secretary of State

Entity Name: LOU BERT JEWELRY INC.

## Current Principal Place of Business:

5614 S FLAMINGO RD  
COOPER CITY, FL 33330 US

## New Principal Place of Business:

## Current Mailing Address:

5614 S FLAMINGO RD  
COOPER CITY, FL 33330 US

## New Mailing Address:

FEI Number: 59-1539256      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOFFLER, DENNIS J CPA  
3900 HOLLYWOOD BLVD PH-N  
HOLLYWOOD, FL 33021 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LUIS,ALAYON,  
Address: 6631 NW 174 LANE  
City-St-Zip: MIAMI FL,

Title: VS ( ) Delete  
Name: CARBONELL, JORGE  
Address: 6631 NW 174 LANE  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: ALBANES, WILFREDO  
Address: 6845 S.W. 22ND STREET  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: KOFFLER, DENNIS  
Address: 3900 HOLLYWOOD BLVD PH-N  
City-St-Zip: HOLLYWOOD, FL 33021

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 Chapter 119, 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: ALBANES, WILFREDO

D

02/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date