2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #466521

1. Entity Name

UNDÉRWOOD JEWELERS CORP.



Principal Place of Business

123 N 20TH STREET C/O FREDERICK W BROMBREG BIRMINGHAM, AL 35203 US Mailing Address

123 N 20TH STREET C/O FREFERICK W BOMBREG BIRMINGHAM, AL 35203 U

FILED Apr 09, 2007 8:00 am Secretary of State

04-09-2007 90064 049 ***150.00

40053570



0	N	Ω	T W	RI.	ΓF	IN	THI	S	SP	ΔC	F
	: 4	v	**		L	114		_	JE		· L

01032007 No Chg-P CR

CR2E034 (11/05)

4. FEI Number 59-1632534

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BROMBERG, C. CLAYTON 2044 SAN MARCO BLVD. JACKSONVILLE, FL 32207

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the purpose of changi tions of registered agent.	ing its registered office or registered agent, or both, in the Sta	te of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE BROMBERG, FRANK H JR NAME STREET ADDRESS 123 N 20TH STREET CITY-ST-ZIP BIRMINGHAM, AL TITLE HAMILTON, JAMES D. NAME STREET ADDRESS 2044 SAN MARCO BLVD CITY - ST - ZIP JACKSONVILLE, FL 32207 THUE BYRNE, PAUL M NAME STREET ADDRESS 123 N 20TH STREET CITY-ST-ZIP BIRMINGHAM, AL TITLE RICHARDS, MICHAEL NAME STREET ADDRESS 2044 SAN MARCO BLVD CITY-ST-ZIP JACKSONVILLE, FL 32207 TITLE BROMBERG, C CLAYTON NAME STREET ADDRESS 2044 SAN MARCO BLVD. JACKSONVILLE, FL 32207 CITY-ST-ZIP TITLE BROMBERG, FREDERICK W NAME 123 NORTH 20TH STREET STREET ADDRESS BIRMINGHAM, AL 35203

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if 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

1-3-0