


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 17, 2006 08:00 AM
Secretary of State**

DOCUMENT # 526232
1. Entity Name
ASSOCIATED JEWELRY, INC.



Principal Place of Business
**36 N.E. 1ST STREET
SEYBOLD BUILDING, SUITE 309
MIAMI, FL 33132**

Mailing Address
**36 N.E. 1ST STREET
SEYBOLD BUILDING, SUITE 309
MIAMI, FL 33132**

DO NOT WRITE IN THIS SPACE



03252006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1846512 Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent
**RUBIN, JONATHAN R.
536 BILTMORE WAY
CORAL GABLES, FL 33134**

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	CHIN-A-YOUNG, ANTHONY L.
STREET ADDRESS	13700 SW 26 ST
CITY-ST-ZIP	DAVIE, FL 33325
TITLE	PDC
NAME	CHIN-A-YOUNG, NORMA
STREET ADDRESS	13400 S.W. 108 PL
CITY-ST-ZIP	MIAMI, FL
TITLE	TDS
NAME	CHIN-A-YOUNG, NICHOLAS
STREET ADDRESS	18619 SW 15 ST
CITY-ST-ZIP	PEMBROKE PINES, FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1000000513097
04/29/06-80117-002 150.00

**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: Norma Chin-A-Young **NORMA L. CHIN-A-YOUNG** 4.13.06 305-3796921

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #