


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2007 8:00 am
Secretary of State

03-22-2007 90010 039 ***150.00

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
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DO NOT WRITE IN THIS SPACE

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01222007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1846512	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~RUBIN, JONATHAN R.
536 BILTMORE WAY
CORAL GABLES, FL 33134~~

DON R LIVINGSTON
7711 SW 62 Ave #101
MIAMI, FL 33143

**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 *Don R Livingstone - Reg. Ag.* DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

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

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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 L. Chin-A-Young* **NORMA L. CHIN-A-YOUNG** 3/20/07 305-3796421

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