

**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

00001000



01222007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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

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 Livingston - Reg. Ag.*
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**

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 #