2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNOAL N	EFUNI (AN	L	7 May 12 2006 00.00 AM
DOCUMENT # 560324 1. Entity Name				Mar 13, 2006 08:00 AM Secretary of State
JEFFERS JEWELRY & GEMS, INC.				
Principal Place of Business Mailing Address				
2881 CLARK RD.,#20		2881 CLARK RD.,#20		
SARASOTA	FL 34231	SARASOTA FL 34231		
2. Principal Place of Business		3. Mailing Address		The state of the s
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 (10/05)
City & State		City & State		4. FEI Number 59-1803585 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent
JEFFERS, KEVIN M			Name	
2881 CLARK ROAD, UNIT 20 SARASOTA FL 34231			Street Address	s (P.O. Bax Number is Not Acceptable)
			City	FL Zip Code
8. The above	named entity submits this statement to	or the purpose of changing its	registered office or regist	tered agent, or both, in the State of Florida. I am familiar with, and accept
the obliga	tions of registered agent.	00		2 0
SIGNATURE	Eignatum, typed or printed many of registered arrest	Jehn Julio A applicable. (NOTE	. Hepisterea Agent signature requi	3-9-06 (ag when rossitated) DATE
Si Washing	ILE NOW!!! FEE IS \$150.00			
After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				S. Election Campaign Financing \$5.00 May Be     Trust Fund Contribution.      Added to Fees
10.	OFFICERS AND		tt.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	PTS	☐ Delete	TITLE	UG0000463223 ☐ Change ☐ Addillon
NAME STREET ADDRESS	JEFFERS, KEVIN M 2881 CLARK RD.		NAME STREET ADDRESS	03/21/06-30068-012 150.00
CITY-ST-ZIP	SARASOTA FL		C(TY-ST-ZIP	
TITLE		☐ Delete	TITLE MANNE	☐ Change ☐ Addition
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CITY-SI-ZIP		Π	CITY-SI-ZIP	Channe Flaure
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STREET ADDRESS	{		STREET ADORESS	
CITY-SI-ZIP	<u> </u>		CATY-ST-ZIP	

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 cath, that I am an officer or direction 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 1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kevin M. Dellew Kevin M. JEFFELS 3-9-06 941-922-83.