**FILED** 

## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Apr 21, 2003 8:00 am Secretary of State 560324 DOCUMENT # 1. Entity Name 04-21-2003 90375 046 \*\*\*150.00 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 Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-1803585 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ELLIS. STEPHEN F. Street Address (P.O. Box Number is Not Acceptable) 1800 SECOND STREET STE 806 SARASOTA FL 34236 City Zip Code 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 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITI F ☐ Change ☐ Addition ☐ Delete TITLE JEFFERS, JACK NAME NAME 2881 CLARK RD. STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition JEFFERS, LOLA L. NAME NAME STREET ADDRESS 2881 CLARK RD. STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME JEFFERS, KEVIN M. NAME STREET ADDRESS 2881 CLARK RD. STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP ☐ Delete - - Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C!TY-ST-ZIP TITLE Change ☐ Delete TITLE ☐ Addition NAME NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attaches

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP