2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # G93075

1. Entity Name
RABURN JEWELERS, INC.

Principal Place of Business	Mailing Address
% DAVID A. DUNKIN	% DAVID A. DUNKIN
170 W. DEARBORN	170 W. DEARBORN
ENGLEWOOD, FL 34223	ENGLEWOOD, FL 34223

DO NOT WRITE IN THIS SPACE

01092007   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
59-2412543		Not Applicable

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

6. Name and Address of Current Registered Agent

DUNKIN, DAVID A.
170 W. DEARBORN
ENGLEWOOD, FL 34223

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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 changing)   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	DP
NAME	BURNS, DENNIS
STREET ADDRESS	2173 S. TAMIAMI TRAIL
CITY-ST-ZIP	VENICE, FL

TITLE	D
NAME	BURNS, ELLEN
STREET ADDRESS	2173 S. TAMIAMI TRAIL
CITY-ST-ZIP	VENICE, FL

TITLE	
NAME	
STREET ADDRESS	
CITY ST-ZIP	

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: _____   3·1·07

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