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Jul 02, 2002 8:00 am
Secretary of State
05-01-2002 91514 023 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H59282

1. Entity Name
QUANTUM JEWELRY, INC.

[redacted]

96305

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2. Principal Place of Business
QUANTUM JEWELERS
9616 SW 77 AVE
Miami FL
33156 DADE

3. Mailing Address
13520 SW 66 AVE
Suite, Apt. #, etc.
PINECREST FL
33156 USA

4. FEI Number
59-2544991
☐ Applied For
☐ Not Applicable

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

7. Name and Address of Current Registered Agent
Name: RICHARD C LEWIS
Street Address (P.O. Box Number is Not Acceptable):
9150 S DADELAND BLVD
SUITE 1209
City: MIAMI FL Zip Code: 33156

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT / DIR RAYMOND MORRIS ☒ CHANGE 13520 SW 66 AVE PINECREST FL 33156
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/01)

13. I hereby 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Raymond Morris RAYMOND MORRIS 04-18-02 305-270-1230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #