

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H82860

FILED  
Jan 28, 2009  
Secretary of State

Entity Name: THE GOLD MINE JEWELRY EXCHANGE, INC.

**Current Principal Place of Business:**

3835 N. 50TH STREET  
STE. D  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

3835 N. 50TH STREET  
STE. D  
TAMPA, FL 33619 US

**New Mailing Address:**

FEI Number: 59-2617929      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

PORAT, RON CPA  
6702 N GUNLOCK AVE  
TAMPA, FL 33614 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: MRG ( ) Delete  
Name: DEATON, WILLIAM  
Address: 3835 N 50ST ST, STE. D  
City-St-Zip: TAMPA, FL 33619

Title: P ( ) Delete  
Name: FLOYD, GREG  
Address: 3835 N 50TH STREET, STE. D  
City-St-Zip: TAMPA, FL 33619

Title: VP ( ) Delete  
Name: FLOYD, MARATHA  
Address: 3835 N. 50TH STREET, STE. D  
City-St-Zip: TAMPA, FL 33619

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: FLOYD, MARTHA  
Address: 3835 N. 50TH STREET, STE. D  
City-St-Zip: TAMPA, FL 33619

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEATON, WILLIAM

MRG

01/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date