

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J22023

1. Entity Name
SUNGOLD JEWELRY, INC.



Principal Place of Business
% IMRAN SUNGUR
1953 N UNIVERSITY DR
CORAL SPRINGS FL 33071

Mailing Address
% IMRAN SUNGUR
1953 N UNIVERSITY DR
CORAL SPRINGS FL 33071

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2694538

Applied For
Not Applicable

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



REINSTATEMENT 03
CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUNGUR, IMRAN
1953 N UNIVERSITY DR
CORAL SPRINGS FL 33071

Name

Street Address (P.O. Box Number is Not Acceptable)

300023522243
10/02/03--01084--016 **550.00

City

FL

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)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME SUNGUR, IMRAN
STREET ADDRESS 4411 FOXTAIL LANE
CITY-ST-ZIP WESTIN FL 33311
10174 NW 17st.
Coral Springs FL 33071

TITLE IMRAN SUNGUR
NAME IMRAN SUNGUR
STREET ADDRESS 10174 NW 17st
CITY-ST-ZIP Coral Springs FL 33071
☒ Change ☐ Addition

TITLE DS
NAME SUNGUR, SHANNON
STREET ADDRESS 4411 FOXTAIL LANE
CITY-ST-ZIP WESTIN FL 33311
10174 NW 17st
Coral Springs FL 33071

TITLE SHANNON SUNGUR
NAME SHANNON SUNGUR
STREET ADDRESS 10174 NW 17st
CITY-ST-ZIP Coral Springs FL 33071
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
300023522243
11/24/03--01020--002 **200.00
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Druck
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)