


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # J54515
 1. Entity Name
 GILBERT JEWELERS, INC.



Principal Place of Business
 364 FIRST AVE N.
 ST PETERSBURG, FL 33701

Mailing Address
 364 FIRST AVE N.
 ST PETERSBURG, FL 33701



01202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 59-2754862 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 GILBERT, JEROME
 364 FIRST AVE N.
 ST PETERSBURG, FL 33701

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
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
After May 1, 2006 Fee will be \$550.00

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

1100000408030
 02/08/06-80044-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GILBERT, JEROME
STREET ADDRESS	301 61ST ST N.
CITY-ST-ZIP	ST PETERSBURG, FL
TITLE	ST
NAME	GILBERT, THELMA
STREET ADDRESS	301 61ST ST N.
CITY-ST-ZIP	ST PETERSBURG, FL
TITLE	VP
NAME	GILBERT, RONALD
STREET ADDRESS	15810 3RD ST. E.
CITY-ST-ZIP	REDINGTON BCH., FL
TITLE	VP
NAME	GILBERT, MARK
STREET ADDRESS	7226 8TH AVE. NO.
CITY-ST-ZIP	ST. PETERSBURG, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE 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: Thelma D. Gilbert THELMA D. GILBERT 1/26/06 727-8952324
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone