

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000006388

1. Entity Name
R & S JEWELERS, LLC



Principal Place of Business
3291 W. SUNRSIE BLVD
FORT LAUDERDALE, FL 33311

Mailing Address
12224 NW 30TH AVE
SUNRISE, FL 33323



01042005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3629999

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANN & WOLF, LLP
4300 N. UNIVERSITY DR., #C-203
FT. LAUDERDALE, FL 33351

**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

Signature typed or printed name of registered agent and title if applicable

NOTE: Registered Agent must sign and date this report.

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
GEDHOVICH, DAVID
12224 NW 30TH AVE
SUNRISE, FL 33323

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
GEDIHOVICH, PETER
3948 OSPREY COURT
WESTON, FL 33331

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
GEDHOVICH, NATALIA
3948 OSPREY COURT
WESTON, FL 33331

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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01/10/05-80058-006 50.00

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #