## 2005 LIMITED LIABILITY COMPANY

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## FILED ANNUAL REPORT Feb 17, 2005 08:00 AM Secretary of State DOCUMENT # L02000017773 1. Entity Name CHRISABELLA JEWELRY LLC Principal Place of Business Mailing Address 14638 INDIGO LAKES CIRCLE 14638 INDIGO LAKES CIRCLE NAPLES, FL 34119 US NAPLES, FL 34119 US 01312005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 35-2194430 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **DO NOT WRITE** VALLOZZI, LAUREN M 14638 INDIGO LAKES CIRCLE NAPLES, FL 34119 IN THIS SPACE 3. 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) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME VALLOZZI, LAUREN M MRS. 14638 INDIGO LAKES CIRCLE STREET ADDRESS U00000233531 02/17/05-80044-018 50.00 CITY-ST-ZIP NAPLES, FL 34119 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.