2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 17, 2006 8:00 am Secretary of State

DOCUMENT # L0400004958 1. Entity Name CRESCENT JEWELERS LLC						04-17-2006 9	90046 019 **	**50.00)	
Principal Place 3450 LITHIA VALRICO, FL	PINECREST ROAD	Mailing Address 3450 LITHIA PINECRES VALRICO, FL 33594	3450 LITHIA PINECREST ROAD			49111 PIBYL ABYLL PAIN MBY	: = wiii walih miata imimi	*******	: 1 111 ;	
2. Principal Place of Business		3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		04032006	Chg-LLC	CR2E083 (11	/05)		
City & State		City & State	City & State		4. FEI Numbe 65-121			Applied Not Ap	d For plicable	
Zip	Country	Zip	Country		.	of Status Desired	Fee Re	Addition quired	al	
	6. Name and Address of Curre	nt Registered Agent		Name	7. Name and	Address of New R	egistered Agent			
EATON R	∩DVNI			мапте	Name					
EATON, ROBYN 3450 LITHIA PINECREST ROAD VALRICO, FL 33594				Street Addr	Street Address (P.O. Box Number is Not Acceptable)					
				City			FL Zig	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. 1 am familiar with, and accept the obligations of registered agent.									accept	
SIGNATURE.	Signature, typed or printed name of registered ag	ent and title if applicable. {NQT	E: Registere	d Agent signature r	equired when reinstating)		DATE		_	
						•				
!						• •	-			
Fi D:	iling Fee is \$50.00 ue by May 1, 2006						e check payable Department of			
Fi Dı	ue by May 1, 2006	BERS/MANAGERS	10.				Department of			
D:	ue by May 1, 2006	BERS/MANAGERS	10. Title	E		Florida	Department of	State] Addition	
9.	MANAGING MEM MGRM EATON, ROBYN	☐ Delete		ľ		Florida	Department of CHANGES	State] Addition	
9.	ue by May 1, 2006 MANAGING MEM MGRM	☐ Delete	TITLE NAMI STRE	ľ		Florida	Department of CHANGES	State] Addition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEM MGRM EATON, ROBYN 3450 LITHIA PINECREST ROA	☐ Delete	TITLE NAMI STRE CITY	E ET ADDRESS -ST-ZIP		Florida	Department of CHANGES	State	Addition Addition	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEM MGRM EATON, ROBYN 3450 LITHIA PINECREST ROA	☐ Delete	TITLE NAMI STRE CITY TITLE	E EET ADDRESS -ST-ZIP E		Florida	CHANGES	State		
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indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I a limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

4-14-00 813-043-1040 E Date Daytime Phone #