2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040876

Address:

City-St-Zip:

Entity Name: FAMILY JEWELS SHOP, LLC

FILED Jul 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2490 SE 7TH STREET POMPANO BEACH, FL 33062 US **Current Mailing Address: New Mailing Address:** 2490 SE 7TH STREET POMPANO BEACH, FL 33062 US FEI Number: 20-1186239 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHULMAN, ADAM 2490 SE 7TH STREET POMPANO BEACH, FL 33062 US 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: MGRM () Change (X) Addition SCHULMAN, ADAM Name: Name: Address: Address: 2490 SE 7TH STREET City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33062 Title: Title: MGRM () Change (X) Addition () Delete Name: Name: PORTELA, ORLANDO Address: Address: 2490 SE 7TH STREET City-St-Zip: City-St-Zip: POMPANO BEACH, FL 33062 Title: () Delete Title: MGRM () Change (X) Addition ROBINSON, RENEE Name: Name: 7970 NOB HILL ROAD

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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.

Address:

City-St-Zip:

TAMARAC, FL 33321

SIGNATURE: ADAM SCHULMAN **MGRM** 07/02/2005