# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # L32563**

1. Entity Name

ROYAL DIAMOND & JEWELRY EXCHANGE, INC.



Principal Place of Business

3955 JOG ROAD

**GREEN ACRES PLAZA** 

GREEN ACRES CITY, FL 33467-1517

Mailing Address

3955 JOG ROAD GREEN ACRES PLAZA

GREEN ACRES CITY, FL 33467-1517

## **FILED** May 21, 2004 8:00 am Secretary of State

04-23-2004 90209 016 \*\*\*150.00

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04192004	No Chg-P	CR2E034 (10/03)	

DO NO	T WOLTE IN THE COACE	04192004	No Chg-P	CR2E03
טט אט	T WRITE IN THIS SPACE	4. FEI Number 65-0159		

Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent WIENBERG, CARL H. 2600 N. MILÍTARY TRAIL FOURTH FLOOR

BOCA RATON, FL 33431			IN THIS SPACE			
	named entity submits this statement for the pons of registered agent.	urpose of changing its registere	d office or re	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accep	
SIGNATURE_	Signature, typed or printed name of registered agent and title i	applicable. (NOTE: Registered	d Agent signature	required when reinstating)	OATE	
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECT	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SOLOMON, KENNETH 3955 JOG ROAD GREEN ACRES CITY, FL		, .	·		
TIPLE NAME						
STREET ADDRESS I CITY-ST-ZIP	•			• • •		
147LE MAME				•		
STREET ADDRESS		_		DO	NOT WRITE	
NAME STHEET ADDRESS CITY-ST-ZIP					THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZP						

12. 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 or supplemental report is that and accurate end that my signature shall have the same legal effect as if made under oright, that I am an officer or director of the corporation or the receiver or trustees impowered 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 a saddress, with all olbest line empowered.