

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2007 8:00 am
Secretary of State


03-21-2007 90032 008 ***150.00

DOCUMENT # L39751 1. Entity Name JEWELRY BY COLE, INC.	
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Principal Place of Business #7 N. BLVD. OF THE PRESIDENTS SARASOTA, FL 34236	Mailing Address #7 N. BLVD. OF THE PRESIDENTS SARASOTA, FL 34236
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DO NOT WRITE IN THIS SPACE

60026069



03052007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0176381	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent POWELL, STEPHEN C 4426 GOLDEN LAKE DR SARASOTA, FL 34233	DO NOT WRITE IN THIS SPACE
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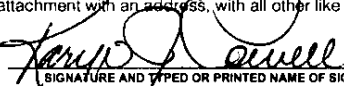
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P POWELL, STEPHEN C. 4426 GOLDEN LAKE DR SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TSV POWELL, KARYN J. 4426 GOLDEN LAKE DR SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered 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 an address, with all other like empowered.

SIGNATURE:  **KARYN J POWELL** **Mar 17/07** **941 388 3323**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #