

2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

**DOCUMENT # L45567**  
1. Entity Name  
PROFESSIONAL JEWELRY APPRAISALS, INC.



**FILED**  
**Apr 25, 2006 08:00 AM**  
**Secretary of State**

Principal Place of Business  
C/O JEFF J. HOFMEISTER  
4770 LAKELY DR.  
TALLAHASSEE, FL 32303

Mailing Address  
P O BOX 38398  
TALLAHASSEE, FL 32315 US



04222006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2992921

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
  
HOFMEISTER, JEFF J.  
4770 LAKELY DR.  
TALLAHASSEE, FL 32303

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HOFMEISTER, JEFF J 4770 LAKELY DR. TALLAHASSEE, FL
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U60000532635  
05/06/06-80101-016 150.00

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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Jeff J. Hofmeister **4-28-06** **850 56242**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #