2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Feb 13, 2006 08:00 AM DOCUMENT # M41052 Secretary of State 1. Entity Name NEW GOLDEN JEWELRY, INC. Principal Place of Business Mailing Address 2000 W. FLAGLER ST. 2000 W. FLAGLER ST. **MIAMI FL 33135** MIAMI FL 33135 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc 1st MOORE CR2E034 (10/05) Applied For City & State City & State 4. FEI Number 59-2739210 Not Applicable Country \$8,75 Additional Zφ Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CARRALERO, DIRELYS Street Address (P.O. Box Number is Not Acceptable) 2000 WEST FLAGLER STREET **MIAMI FL 33135** Zip Code City FL 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. SIGNATURE Cognitions: Typical ox pointed mane of registered agent and title if applicable (NOTE Regislered Agent signature required when remalative) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May 8e After May 1, 2006 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS **PSD** TITLE ☐ Change TITLE Delete U00000430885 NAME CARRALERO, DIRELYS NAME 02/23/06-80006-017 150.00 821 S.W. 142ND COURT STREET ADDRESS STREET ADDRESS City-St-ZiP MIAMI FL 33184 CITY - ST- 789 ☐ Change Addition ☐ Delete DILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition [] Detete NAME MAME STREET ADDRESS STREET AUGRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition HILE Delete MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CATY-ST-ZIP ☐ Change Addition TITLE ☐ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CMY-ST-ZIP CITY-ST-ZIP Addition THILE ☐ Delete TITLE Change NAME NAMI STREET ADDRESS STREET ADDRESS CHY-ST-IW CITY-ST-ZIP 12. I hereby certily that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information inclicated 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 attackment with an address. All all other like empowered.

JIZELYS CARPALERO

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2/9/05

FILED