

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M42487

Entity Name: B.O.S. JEWELERS, INC.

FILED
Jan 15, 2007
Secretary of State

Current Principal Place of Business:

36 N.E. 1ST STREET, SUTE 113
MIAMI, FL 33132 US

New Principal Place of Business:

36 N.E. 1ST STREET, SUTE 133
MIAMI, FL 33132 US

Current Mailing Address:

36 N.W. 1ST STREET, SUITE 133
MIAMI, FL 33132 US

New Mailing Address:

36 N.E. 1ST STREET, SUITE 133
MIAMI, FL 33132 US

FEI Number: 59-2741292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOWINSKI, STANISLAS
7601 SW 82 COURT
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SOWINSKI, STANISLAS
Address: 7601 SW 82 COURT
City-St-Zip: MIAMI, FL 33143

Title: SD () Delete
Name: SOWINSKI, ANA MARIA
Address: 7601 SW 82 COURT
City-St-Zip: MIAMI, F 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STANISLAS SOWINSKI

PD

01/15/2007

Electronic Signature of Signing Officer or Director

_____ Date