

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # N99000000658

1. Entity Name

HOLLYWOOD'S DIAMONDS IN THE ROUGH INC.



Principal Place of Business

400 ENTRADA DR.
HOLLYWOOD, FL 33021-7040

Mailing Address

400 ENTRADA DR.
HOLLYWOOD, FL 33021-7040



01062005 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0921681

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KLITZ, ROBERT G
400 ENTRADA DR.
HOLLYWOOD, FL 33021-7040

**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

ROBERT G. KLITZ

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/6/05

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KLITZ, ROBERT G
STREET ADDRESS	400 ENTRADA DR.
CITY - ST - ZIP	HOLLYWOOD, FL 330217040
TITLE	VPD
NAME	BENSON, CAMERON
STREET ADDRESS	2600 HOLLYWOOD BLVD
CITY - ST - ZIP	HOLLYWOOD, FL 33022
TITLE	TD
NAME	REINFELD, MILDRED
STREET ADDRESS	400 ENTRADA DR.
CITY - ST - ZIP	HOLLYWOOD, FL 330217040
TITLE	SD
NAME	FLATTERTY, DAVID
STREET ADDRESS	1940 HARRISON ST SUITE# 101
CITY - ST - ZIP	HOLLYWOOD, FL 33020
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11000000181901
01/19/05-80006-012 61.25

**DO NOT WRITE
IN THIS SPACE**

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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, and all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT G. KLITZ

Date

Daytime Phone #

1/6/05

954-967-4653 x-38