## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Sep 17, 2001 8:00 am Secretary of State P00000068206 DOCUMENT # 1. Entity Name 09-17-2001 90131 022 \*\*\*150.00 BEST STOP JEWELRY SHOP, INC. Principal Place of Business Mailing Address 36 NE 1 STREET STE 344 36 NE 1 STREET STE 344 979228 MIAMI FL 33132 MIAMI FL 33132 2. Principal Place of Business 3. Mailing Address 5707 SW 69 Court Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For \_City & State City & State 4. FEI Number Florida Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GONZALEZ, AMARILYS A Street Address (P.O. Box Number is Not Acceptable) 36 NE 1 STREET STE 344 MIAMI-FL 33132 SW 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete TITLE ■ Addition CR2E034 (5/01 Jesus Gonzalez NAME NAME 5707 SW 69 COUT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE □ Delete ☐ Change Amarilys A. Gonzalez NAME NAME 5707-5W-69-COVIT-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment

## Atachment 919828 # PODOSO 682020

BACK

mailing address.

We were also told by your Dept. that it would be of for us to send the initial \$150. Filing fee since we were not aware of the deadline.

Thank you for your onderstanding + God Bless.

Cabriller

FRONT

Lest of State Div. of Corporations

Re BEST STOP JEWELRY Stop + P000000 68206

9/9/01

PER my conversation with Hickelle of your Dept - We were never notified of the 1st Notice sent by your Dept and your records show the notice was returned the second notice was apparently delivered to another suite in the building and given to us by new tenants recently. Therefore we are changing the

## AHachment 979888 # POD.00068200

PER my conversation with Michelle of your Dept - 10 of the 1st Notice sent by your Dept. and your records show the notice was notice was apparently delivered to another suite in the building and given are changing the