2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 11, 2008 08:00 AM Secretary of State DOCUMENT # P01000006552 1. Entity Name U.S.A. JEWELRY, INC. Mailing Address Principal Place of Business 3015 N.W. 79TH ST., STE, E50 3015 N.W. 79TH ST., STE. E50 MIAMI, FL 33147 MIAMI, FL 33147 01312008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1070702 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SALIM, MOUISE 3015 N.W. 79TH ST., STE. E50 MIAMI, FL 33147 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, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. . Added to Fees OFFICERS AND DIRECTORS 10. TITLE **PVST** SALIM, MOUISE NAME 3015 N.W. 79TH ST., STE. E50 STREET ADDRESS CiTY-ST-ZIP MIAMI, FL 33147 U00000824233 02/20/08-80070-005 150.00 TITLE SALIM, MOUISE NAME 3015 N.W. 79TH ST., STE. E50 STREET ADDRESS MIAMI, FL 33147 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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

NAME STREET ADDRESS,

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED