

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

FILED


03 JAN 29 PM 1:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

700011793277  
02/04/03--01093--002 \*\*300.00

DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT ~~1999~~ 2003



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P 01000015633  
1. Corporation Name  
DM JEWELRY REPAIR, INC.

Principal Place of Business Mailing Address  
557 DELMONICO ST. NE  
PALM BAY, FL. 32901  
SANG

21	2. Principal Place of Business	26	2a. Mailing Address
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip Country	29	Zip Country

3.	Date Incorporated or Qualified	3/15/2001
4.	FEI Number	59-3101418
	Applied For	Not Applicable
5.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
8.	This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent  
MIDDENDORF, DEREK  
557 DELMONICO ST. NE  
PALM BAY, FL. 32901

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D, P, VP, S, T <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIDDENDORF, DEREK	1.2 NAME	
STREET ADDRESS	557 DELMONICO ST. NE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY, FL 32901	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: D. P. VP, S. T. MIDDENDORF, DEREK 1-16-03. 321-953-2163

CD02024 (11/08)

Attachment

PO1000015633

Fl. Dept of State  
Div of Corporations  
P.O. Box 1500  
Tallahassee, Fl. 32302-1500

1/16/03

To Whom It May Concern:

While working this evening with Mr. Derek Muddendorf of D.M. Jewelry Repair, Inc. (PO1000015633) he was not able to find his 2003 Annual Report which he ~~is~~ insists he did not receive. Recognizing the implication I had him check his records and he verified he has not paid \$150.00 or any other amount during the calendar year 2002 for the 2002 U.B.R. either. After carefully describing the report he insists he did not receive that 2002 U.B.R. report to the best of his knowledge. The address you have on file for him is the correct address but I can't ~~imagine~~ imagine that he has not received any communication from the state in the last 2 years.

It is requested that you verify he is in fact delinquent for his 2002 U.B.R. fee according to your ~~own~~ records (he has been voluntarily dissolved). It is further requested that he be allowed to plea ignorant to the existence of this report and if it is truly so to ~~the~~ ~~state~~ ~~of~~ ~~Fl.~~ ~~as~~ ~~per~~ ~~the~~

Attachment  
#01000015633

payment ~~as~~ and allow him to be reinstated  
The enclosed check will be as follows:

2002 UBR	\$ 150.00
2003 UBR	\$ 150.00
	<hr/>
	\$ 300.00

If it is possible to rectify the  
situation it would be greatly appreciated  
~~that~~

Sincerely yours

Michael Sater  
Accountant for DM JEWELRY REPAIR, INC