

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 MAY 21 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Entity Name

001 000042396

JEWELRY WATCH DIAMONDS (JWD) CONSULTANT, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4330 W. BROWARD BLVD.

Suite, Apt. #, etc.

SUITE L

City & State

PLANTATION, FL 33317

Zip

33317

Country

U.S.A.

3. Mailing Address

4330 W. BROWARD BLVD

Suite, Apt. #, etc.

SUITE P

City & State

PLANTATION, FLORIDA

Zip

33317

Country

U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1096391

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MEGAN MCQUIRE

Street Address (P.O. Box Number is Not Acceptable)

910 SMITH AVE MCQUIRE & ASSOC.

4330 W. BROWARD BLVD, SUITE P

City

PLANTATION

FL

Zip Code

33317

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)

4/30/02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
J. FELIX - PRESIDENT
4330 W. BROWARD BLVD. #P
PLANTATION, FL 33317

TITLE
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****450.00 ****150.00

DO NOT WRITE
IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)