


1072

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 SEP 22 AM 8:17

DOCUMENT # P01000053166 1. Entity Name PASADENA ESTATE JEWELRY, INC.	
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Principal Place of Business 790 PASADENA AVE SOUTH PASADENA, FL 33707	Mailing Address 790 PASADENA AVE SOUTH PASADENA, FL 33707
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



08302005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3760195	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent	
7. Name and Address of New Registered Agent	
PHAN, DAVID 790 PASADENA AVE SOUTH PASADENA, FL 33707	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL Zip Code	

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD <input type="checkbox"/> Delete	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE		
NAME	PHAN, DAVID	NAME			
STREET ADDRESS	790 PASADENA AVE SOUTH	STREET ADDRESS			
CITY-ST-ZIP	PASADENA, FL 33707	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE			
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE			
NAME		NAME			
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CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE			
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CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE			
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			

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 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 fees empowered.

SIGNATURE: DAVID PHAN PRESIDENT  
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: X09.19.05 (727) 345-3735  
Date Daytime Phone #

2 of 2

**Roy M. Magruder, CPA & CFE**  
**10670 43 rd Street North - #203**  
**Clearwater, FL 33762**

**PHONE#(727) 592-0023 - FAX#(727)561-0231 - CELL#(727) 420-8932**

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September 15, 2005

**Department of State**  
**Division of Corporations**  
**Clifton Building**  
**2661 Executive Center Circle**  
**Tallahassee, Fl 32301**

**My client is forwarding its annual report for 2005. The client did not receive the original report.**

**Enclosed is the \$150.00 annual fee, please accept this as timely filed.**

**Your cooperation in this matter is appreciated.**

**Yours truly,**

  
**Roy M. Magruder**