2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000085625

Principal Place of Business

1. Entity Name CARSON ESTATE JEWELERS, INC.



Mailing Address

C/O CHARLES M CARSON 9900 W. SAMPLE RD.- STE 300 CORAL SPRINGS, FL 33065-4048 C/O BLAKSBERG & COMPNAY CPA'S 951 SW 4TH AVE BOCA RATON, FL 33432-5803

FILED Apr 17, 2006 08:00 AM Secretary of State



DO	NOT	WRITE	IN TH	IIS	SPA	CE
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Applied For 4. FEI Number 65-1139011 Not Applicable

5. Certificate of Status Desired

No Chg-P

04102006

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

BLAKESBERG, WILLIAM J 951 SW 4TH AVE BOCA RATON, FL 33432-5803

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the p ions of registered agent.	urpose of changing its registered	l alfice ar r	egistered agent, or both	n, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and title it	applicable. [NOTE. Plegistered.	Agent signaturi	e required when reinstaling)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	ing 📙	\$5.00 May 89 Added to Fees			
10.	OFFICERS AND DIREC	TORS					
Title Mank Street address City-St-Zip	PD CARSON, CHARLES 9900 W. SAMPLE RD., STE 300 CORAL SPRINGS, FL 330554048						
TITLE NAME STREET ADDRESS DITY-ST-ZIP							
THILE NAME STREET ADDRESS CHY-ST-ZIP				DO	NOT WRITE		
NTLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE			
TITLE NAME STREET AOURESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby	certily that the information supplied with this fit on this report or supplemental report is true :	iling does not qualify for the exe and accurate and that my signali	mptions co are shall ha	ntained in Chapter 119 we the same legal effective	Florida Statutes 1 further certify that the information it as if made under eath, that I am an officer or director		

mulcated on this report of supplemental report is true and accurate and matery signature standard tree same legal effect as it made under outly land office for bifector of the corporation or this receiver or trustee ampowered to execute this report as required by Chapter 507, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES CARSON