

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000096512

Entity Name: MARSILVIA JEWELRY INC.

FILED
Aug 13, 2009
Secretary of State**Current Principal Place of Business:**2083 SAXON PLAZA, SAXON BLVD
DELTONA, FL 32725**New Principal Place of Business:****Current Mailing Address:**2083 SAXON PLAZA, SAXON BLVD
DELTONA, FL 32725**New Mailing Address:**

FEI Number: 59-3748280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:OYARBIDE, MARIANO M
3011 CATTAIL LANE
DEBARY, FL 32713 US**Name and Address of New Registered Agent:**OYARBIDE, SILVIA
3011 CATTAIL LANE
DEBARY, FL 32713 US

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: SILVIA OYARBIDE

08/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: OYARBIDE, SILVIA
Address: 3011 CATTAIL LANE
City-St-Zip: DEBARY, FL 32713Title: S T () Delete
Name: OYARBIDE, SILVIA
Address: 3011 CATTAIL LANE
City-St-Zip: DEBARY, FL 32713**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SILVIA OYARBIDE

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08/13/2009

Electronic Signature of Signing Officer or Director

Date