


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000009660	
1. Entity Name CHRISTINE'S JEWELRY BY DESIGN, INC.	

Principal Place of Business 13550 REFLECTIONS PKWY SUITE 2-201 FORT MYERS, FL 33907	Mailing Address 13550 REFLECTIONS PKWY SUITE 2-201 FORT MYERS, FL 33907
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LOUWERS, THOMAS R
1619 PERIWINKLE WAY, SUITE 102
SANIBEL, FL 33957

DO NOT WRITE
IN THIS SPACE

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) **DATE** _____ (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	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

TITLE	PSTD
NAME	PARABOSCHI, CHRISTINE M
STREET ADDRESS	11046 LAKELAND CIRCLE
CITY-ST-ZIP	FORT MYERS, FL 33913
TITLE	V
NAME	LOUWERS, THOMAS R
STREET ADDRESS	1195 SAND CASTLE RD
CITY-ST-ZIP	SANIBEL, FL 33957
TITLE	T
NAME	LOUWERS, THERESA E
STREET ADDRESS	1195 SAND CASTLE RD
CITY-ST-ZIP	SANIBEL, FL 33957
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

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04/26/05-80062-004 150.00

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 like empowered.

SIGNATURE: Theresa E Louwers **4-20-05** **239-466-4949**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #