2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000015144

1. Entity Name

DEJA VU JEWELRY.COM, INC.



FILED May 01, 2006 08:00 A Secretary of State

Principal Place of Business 1440 CORAL RIDGE DR. **SUITE 352**

SIGNATURE:

CORAL SPRINGS, FL 33071

Mailing Address

1440 CORAL RIDGE DR.

SUITE 352

CORAL SPRINGS, FL 33071



DO NOT WRITE IN TH	IIE	S SPACE	
--------------------	-----	---------	--

6. Name and Address of Current Registered Agent

No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 38-3642534 Not Applicable

5. Certificate of Status Desired

04262006

\$8.75 Additional Fee Required

WEITZNER, LES 12442 NW 10TH CT CORAL SPRINGS, FL 33071

DO NOT WRITE IN THIS SPACE

the obligat	ions of registered agent	•		1//~
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE, Registered Ages	at signature required when reinstating)	4/25/04 DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MR WEITZNER, LES 1440 CORAL RIDGE DR SUITE 352 CORAL SPRINGS, FL 33071			U00000545840
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WEITZNER, JANE 1440 CORAL RIDGE DR SUITE 352 CORAL SPRINGS, FL 33071			05/11/06-80093-016 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby of indicated of the corp changed,	pertify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address with all	ling does not qualify for the exempti and accurate and that my signature s to execute this report as required b other like empowered.	ons contained in Chapter 11! hall have the same legal effer y Chapter 607, Florida Statute	9. Florida Statutes. I further certify that the information of as if made under path; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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