

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90221 032 ***150.00

DOCUMENT # P02000021821

1. Entity Name
MR. GOLD JEWELRY, INC.



Principal Place of Business
**810 3RD AVE. S
ST PETERSBURG FL 33701**

Mailing Address
**810 3RD AVE. S
ST PETERSBURG FL 33701**



2. Principal Place of Business
810 3RD AVE S.
Suite, Apt. #, etc.

3. Mailing Address
810 3RD AVE S
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
ST PETERSBURG FL
Zip
33701

City & State
ST PETERSBURG FL
Zip
33701

4. FEI Number
03-0400537

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KIM, YUN JOONG
810 3RD AVE. S
ST PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name **KIM, YUN JOONG**
Street Address (P.O. Box Number is Not Acceptable) **#518**
10200 GANDY BLVD. N.
City **ST PETERSBURG FL** Zip Code **33702**

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 *Yun J Kim* (YUN JOONG KIM)

DATE **1/16/03**

FILE NOW!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **KIM, YUN JOONG**
STREET ADDRESS **810 3RD AVE. S**
CITY-ST-ZIP **ST PETERSBURG FL 33701**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
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 like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YUN JOONG KIM **1/16/03**

Date

Daytime Phone # **727-823-1685**

CR2E034 (10/02)