

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005 8:00 am
Secretary of State

05-09-2005 90292 039 ***150.00

DOCUMENT # P02000030770

1. Entity Name
J. MIRO JEWELERS, INC.



Principal Place of Business
**2121 NORTH BAYSHORE DRIVE
STE 902
MIAMI, FL 33137**

Mailing Address
**2121 NORTH BAYSHORE DRIVE
STE 902
MIAMI, FL 33137**

50050812

2. Principal Place of Business
**1717 N. Bayshore Drive
Suite, Apt. #, etc.
Unit 1236**

3. Mailing Address
**1717 N. Bayshore Drive
Suite, Apt. #, etc.
Unit 1236**

05032005 Chg-P CR2E034 (10/03)

City & State
Miami, Florida 33132

City & State
Miami, Florida 33132

4. FEI Number
33-1022213

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

**MIRO, JULIE C
2121 NO. BAYSHORE DRIVE
SUITE 902
MIAMI, FL 33137**

7. Name and Address of New Registered Agent

Name
Julie C. Miro
Street Address (P.O. Box Number is Not Acceptable)
1717 N. Bayshore Drive
Unit 1236
City **Miami** FL Zip Code **33132**

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

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	MIRO, JULIE C	
STREET ADDRESS	2121 NO. BAYSHORE DRIVE	
CITY-ST-ZIP	MIAMI, FL 33137	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Miro, Julie C.	
STREET ADDRESS	1717 N. Bayshore Drive, Unit 1236	
CITY-ST-ZIP	Miami, Florida 33137	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: _____ President May 4, 2005 786-486-2936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #