

FILED
Jun 27, 2003 8:00 am
Secretary of State

05-07-2003 90137 046 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000037992			
1. Entity Name CONTEMPORARY JEWELRY AND WATCHES INC.			
Principal Place of Business 10141 EAST BAY HARBOR DR. APT. 324 BAY HARBOR, FL 33154		Mailing Address 10141 EAST BAY HARBOR DR. APT. 324 BAY HARBOR, FL 33154	
2. Principal Place of Business 36 NE 1st Suite, Apt. #, etc. 449		3. Mailing Address 36 NE 1st Suite, Apt. #, etc. 449	
City & State Miami, FL		City & State Miami, FL	
Zip 33132	Country USA	Zip 33132	Country USA
4. FET Number 043660771		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARCIA, ADRIAN 10141 EAST BAY HARBOR DR. APT. 324 BAY HARBOR, FL 33154		7. Name and Address of New Registered Agent Name GARCIA, ADRIAN Street Address (P.O. Box Number is Not Acceptable) 36 NE 1st Suite 449 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 ADRIAN GARCIA DATE 4/28/03 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when submitting)			
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE PD	NAME GARCIA, ADRIAN	☒ Delete	
STREET ADDRESS 10141 EAST BAY HARBOR DR. APT. 324	CITY-ST-ZIP BAY HARBOR, FL 33154		
TITLE SVD	NAME AGUDELO, ISABEL	☒ Delete	
STREET ADDRESS 10141 EAST BAY HARBOR DR. APT. 324	CITY-ST-ZIP BAY HARBOR, FL 33154		
TITLE	NAME	☐ Delete	
STREET ADDRESS	CITY-ST-ZIP		
TITLE	NAME	☐ Delete	
STREET ADDRESS	CITY-ST-ZIP		
TITLE	NAME	☐ Delete	
STREET ADDRESS	CITY-ST-ZIP		
TITLE	NAME	☐ Delete	
STREET ADDRESS	CITY-ST-ZIP		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE PD	NAME GARCIA, ADRIAN	☒ Change ☐ Addition	
STREET ADDRESS 36 NE 1st Suite 449	CITY-ST-ZIP Miami, FL 33132		
TITLE SVD	NAME AGUDELO, Isabel	☒ Change ☐ Addition	
STREET ADDRESS 36 NE 1st Suite 449	CITY-ST-ZIP Miami, FL 33132		
TITLE	NAME	☐ Change ☐ Addition	
STREET ADDRESS	CITY-ST-ZIP		
TITLE	NAME	☐ Change ☐ Addition	
STREET ADDRESS	CITY-ST-ZIP		
TITLE	NAME	☐ Change ☐ Addition	
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(5)(1), 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: ADRIAN GARCIA		DATE: 4/28/03 305-975-1241	
SIGNATURE AND TYPED OR PRINTED NAME OF FORMER OFFICER OR DIRECTOR		Date	