2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046291

City-St-Zip:

PARKLAND, FL 33067

F-4:4 Nome NADIA MULIANA FINA

FILED Apr 27, 2005 Secretary of State

Entity Name: NADIA WILLIAMS JEWELRY & DESIGN, INC. **Current Principal Place of Business: New Principal Place of Business:** 5851 HOLMBERG ROAD APT. #722 PARKLAND, FL 33067 **New Mailing Address: Current Mailing Address:** 5851 HOLMBERG ROAD APT. #722 PARKLAND, FL 33067 FEI Number: 04-3656577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HILL, MARLON A ESQ. WACHOVIA FINANCIAL CENTER 200 S BISCAYNE BLVD STE 2680 MIAMI, FL 33131 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition WILLIAMS, NADIA WILLIAMS, NADIA Name: Name: 3240 N.W. 46TH AVENUE 5851 HOLMBERG ROAD, APT#722 Address: Address: PARHLAND, FL 33067 City-St-Zip: FORT LAUDERDALE, FL 33319 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: WILLIAMS, CARINTHA Name: WILLIAMS, CARINTHA 3240 N.W. 46TH AVENUE 5851 HOLMBERG ROAD, APT. 722 Address: Address: FORT LAUDERDALE, FL 33319 PARKLAND, FL 33067 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, NADIA Name: Name: 5851 HOLMBERG ROAD, APT. 722 Address: Address: City-St-Zip: PARKLAND, FL 33067 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, CARINTHIA Name: Name: Address: 8851 HOLMBERG ROAD, APT. 722 Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: NADIA RENE' WILLIAMS D 04/27/2005