

**2007 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 25, 2007 8:00 am
Secretary of State

05-25-2007 90026 010 ***150.00

DOCUMENT # P 030000 28240

1. Entity Name

J'S JEWELRY INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1440 DUHH AVE

Suite, Apt. #, etc.

STE 29

City & State

JACKSONVILLE FL

Zip

32218

Country

USA

3. Mailing Address

1440 DUHH AVE

Suite, Apt. #, etc.

STE 29

City & State

JACKSONVILLE FL

Zip

32218

Country

USA

50001591

DO NOT WRITE IN THIS SPACE

4. FEI Number

90-0087922

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

YOSEF COHEN

Street Address (P.O. Box Number is Not Acceptable)

1440 DUHH AVE

STE 29

City

JACKSONVILLE

FL

Zip Code

32218

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
YOSEF COHEN
1440 DUHH AVE STE 29
JACKSONVILLE FL 32218

TITLE
NAME
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CITY-ST-ZIP

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IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: YOSEF COHEN

[Handwritten Signature]

4/11/07 904-353 5333