## 2007 FOR PROFIT CORPORATION - ANNUAL REPORT (AR)

## Apr 27, 2007 08:00 AM Secretary of State DOCUMENT # P03000047912 1. Entity Namo AVENTURA GEMS & WATCHES, INC. Principal Place of Business Mailing Address 2647 NORTHEAST 186TH TERRACE NORTH MIAMI BEACH FL 33180 POB 6307-12 MIAMI FL 33163 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 20-0374283 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Dosired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo HOLIHAN, MICHAEL W PA Street Address (P.O. Box Number is Not Acceptable) 1101 N LAKE DESTINY RD MAITLAND FL 32751 City Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agant signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSTD** TITLE □ Delete FITLE ☐ Change Addition BERGER, ERIC A NAME NAME U00000739779 2647 NORTHEAST 186TH TERRACE STREET ADDRESS STREET ADDRESS 05/14/07-80041-002 150.00 CHY-SI-7P NORTH MIAMI BEACH FL 33180 CITY-ST-ZIP THE Delete IIITLE Change Addition [ NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-/IP CHY-SI-7P THRE ☐ Defete TULLE Change. Addition NAMI STREET ADDRESS STREET ADDRESS CilY-SI-7IP CHY-SI-ZIP TIFLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-/IP TITLE Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY ST-7(P CITY-ST-7/P

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutos, 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 eath; 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:

4-24-07

305-933-9576

**FILED**