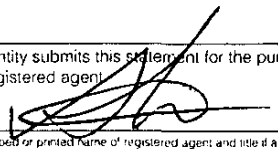
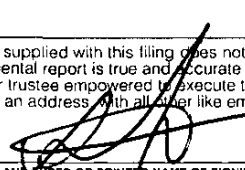


2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 JUN -9 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000092770 1. Entity Name ABRAHAM & SONS JEWELRY, INC.																													
Principal Place of Business 8831 N.W. 80 DRIVE TAMARAC, FL 33321			Mailing Address 8831 N.W. 80 DRIVE TAMARAC, FL 33321																										
2. Principal Place of Business - No P.O. Box # 3161 W. OAKLAND PK BLVD		3. Mailing Address 19390 COLLINS AVE																											
Suite, Apt. #, etc. # 1215, 1220		Suite, Apt. #, etc. # 1224																											
City & State FT. LAUDERDALE, FL		City & State SUNNY ISLE, FL		4. FEI Number 57-1181931																									
Zip 33311		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																									
Zip 33160		Country USA		6. Name and Address of Current Registered Agent ABRAMCHAEVA, SVETLANA 8831 N.W. 80 DRIVE TAMARAC, FL 33321																									
7. Name and Address of New Registered Agent Name ARKADI ERIC ABRAHAM Street Address (P.O. Box Number is Not Acceptable) 19390 COLLINS AVE #1224 City SUNNY ISLE FL Zip Code 33160		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  DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)																											
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">P</td> <td style="width:10%; text-align: center;">☒ Delete</td> </tr> <tr> <td>NAME</td> <td>ABRAMCHAEVA, SVETLANA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>8831 N.W. 80 DRIVE</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>TAMARAC, FL 33321</td> <td></td> </tr> </table>			TITLE	P	☒ Delete	NAME	ABRAMCHAEVA, SVETLANA		STREET ADDRESS	8831 N.W. 80 DRIVE		CITY - ST - ZIP	TAMARAC, FL 33321		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:60%;">P</td> <td style="width:10%; text-align: center;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>ARKADI ERIC ABRAHAM</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>19390 COLLINS AVE #1224</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>SUNNY ISLE FL 33160</td> <td></td> </tr> </table>			TITLE	P	☐ Change ☒ Addition	NAME	ARKADI ERIC ABRAHAM		STREET ADDRESS	19390 COLLINS AVE #1224		CITY - ST - ZIP	SUNNY ISLE FL 33160	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  DATE _____ DAYTIME PHONE # _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													