2008 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT				Mar 13, 2008 08:00			
DOCUI	MENT # P030000959				cretary of Si		
	ME & JEWELRY INC.						
Principal Plac	e of Business	Mailing Address					
7020 S HIGH FERN PARK,		7020 S HIGHWAY 17-92 FERN PARK, FL 32730 US	:				
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				03062008	No Chg-P	CR2E034 (11/05)	
	O NOT WRITE	IN THIS SPA	CE	4. FEI Number		Applied F	or
				61-1435	388	Not Appli	cable
				5. Certificate o	f Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current Re	gistered Agent					
VAZQUEZ	RICK			חח	NOT W	DITE	
480 CHAPELWOOD DR APOPKA, FL 32712				* M. R. Res. A Meser's	See 12 6 15 15 15	refit is the second of the sec	11
APOPKA,	FL 32/12			INT	HIS SP	ACE	

	named entity submits this statement for the	ne purpose of changing its registe	red office or register	ed agent, or both	, in the State of Flo	rida/ I am familiar with, and ac	cept
the obligat	ions of registered agent.				マ	liolo	
SIGNATURE	Signalure, typed or printed name of registered agent and	title if applicable. (NOTE: Register	red Agent signature required	when reinstating)		1/0/08 BAIE	-
		The indicates th			<u> </u>		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Fina Trust Fund Contribution		.00 May Be ed to Fees			
10.	OFFICERS AND DI	RECTORS					"''
TITLE NAME	P VAZQUEZ, RICK						
STREET ADDRESS	480 CHAPELWOOD DR						
CITY-ST-ZIP	APOPKA, FL 32712						
title Name					1. 1. UO 000008	read that it was to be a constitution of the c	
STREET ADDRESS						0013-0091150.00	. T 6
CITY-ST-ZIP	<u> </u>					RITE ACE	
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TITLE NAME				NI	HIS SP	ACE	;
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CITY-ST-ZIP							
TITLE NAME							
STREET ADDRESS	_				自然等。此一		
CITY-ST-ZIP	<u> </u>						
TITLE	· ·		■ 2000年 1 1000年 1	医腹壁 伊 外籍	《新闻》(2) 指:1995年第	三、"好性效",是" * " , 如 吃	

12. I hereby certify that the information supplied with this filling 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 all address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR