

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90011 022 ***150.00

DOCUMENT # P03000133635 1. Entity Name LOVE DETAIL JEWELRY, CORP.			
Principal Place of Business 15787 SW 77 STREET MIAMI, FL 33193		Mailing Address 15787 SW 77 STREET MIAMI, FL 33193	
2. Principal Place of Business - No P.O. Box # 15787 SW 77 Street Suite, Apt. #, etc. Suite # 19 City & State Miami Florida Zip 33193		3. Mailing Address 15787 SW 77 Street Suite, Apt. #, etc. Suite # 19 City & State Miami Florida Zip 33193	
4. FEI Number 33-1076210		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		02112008 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent VILLA, MARTA L 15787 SW 77 STREET MIAMI, FL 33193		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 15787 SW 77 Street Suite #19 City Miami FL Zip Code 33193	
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: <u>Marta Vella R</u> DATE: <u>02-11-08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILLA, MARTA L 15787 SW 77 STREET MIAMI, FL 33193	TITLE NAME STREET ADDRESS CITY-ST-ZIP	15787 SW 77 st Suite #19 Miami FL 33193
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>Marta Vella R</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u>02-11-08</u> Daytime Phone #: <u>305 3182823</u>	