2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000111893

Entity Name: SOUTH FLORIDA JEWEL, INC.

DEROCHE, MICHELLE

2182 S.W. CADIZ AVENUE

PORT ST. LUCIE, FL 34953

Name:

Address:

City-St-Zip:

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2801 S.W. BRIGHTON STREET PORT ST. LUCIE, FL 34953 **Current Mailing Address: New Mailing Address:** 2801 S.W. BRIGHTON STREET PORT ST. LUCIE, FL 34953 FEI Number: 20-1417571 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEWNAM, DENNY U 6121 S.E. LANDING WAY STUART, FL 34997 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition GOINGS, WAYNE Name: Name: 1932 S.W. DELMONICO AVENUE Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: DEROCHE, DONALD Name: 2182 S.W. CADIZ AVENUE Address: Address: PORT ST. LUCIE, FL 34953 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition HAZY-GOINGS, JULIE Name: Name: 1932 S.W. DELMONICO AVENUE Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: Title: ST () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHELLE DEROCHE ST 04/20/2006