


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000117508		
1. Entity Name PLAZA OAKRIDGE JEWELRY & PAWN, INC.		

FILED  
05 AUG 26 AM 8:27

Principal Place of Business 4025 W OAKRIDGE ROAD ORLANDO, FL 32809	Mailing Address 4025 W OAKRIDGE ROAD ORLANDO, FL 32809
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8/9/05 96004-0279 \$8.75

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

08232005 Chg-P CR2E034 (10/03)

4. FEI Number  
201500477

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
COLON, PEDRO A 1238 COURTNEY CHASE CIRCLE APT 1411 ORLANDO, FL 32837	

7. Name and Address of New Registered Agent	
Name NORBERT YOUNG CPA	
Street Address (P.O. Box Number is Not Acceptable) 25 S. MAGNOLIA AVE	
City ORLANDO	FL Zip Code 32801

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: NORBERT N. YOUNG CPA DATE: 08/23/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Hugo Astudillo DATE: 08/23/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-352-0011  
AUG 26 2005