

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 15, 2005 8:00 am**  
**Secretary of State**

07-15-2005 90022 044 \*\*\*150.00

20064207



07132005 Chg-P CR2E034 (10/03)

4. FEI Number **20-1918540** Applied For ☐ Not Applicable ☒

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

## 6. Name and Address of Current Registered Agent

MORTON, MICHAEL E  
5221 OCEAN BLVD  
#5  
SARASOTA, FL 34242

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 *Z. Z. J.*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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.

## 10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
NAME **MORTON, MICHAEL E**  
STREET ADDRESS **5221 OCEAN BLVD #5**  
CITY-ST-ZIP **SARASOTA, FL 34242**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Z. Z. J.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*MICHAEL E. MORTON*

Date

Daytime Phone #

*7/13/05*

*(941)349-2748*

ATTACHMENT

20064207

MICHAEL & CO. JEWELERS, INC.

5221 OCEAN BLVD UNIT 5

SARASOTA, FLORIDA 34242

Phone 941-349-2748

Division of Corporations  
Uniform Business Report Filings  
Tallahassee, Florida 32302-1500

July 12, 2005

RE: Corp # P04000159105

Dear Sirs or Madam,

I am writing to ask for an abatement of the \$400.00 late filing penalty.

At the end of November 2004, we were advised to incorporate. Unfortunately we were not told that we would have to renew in two months, or we would have waited to incorporate. All paper work that comes to us is given to our Accountant. He claims we never gave him the post card. We believe it may have been forwarded to the old owner of the business. Therefore we have enclosed a check for \$150.00 and are asking for an abatement of the penalty.

Thank you in advance for your consideration.

Sincerely



Michael E. Morton  
President