

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000047256

1. Entity Name  
PORTOFINO JEWELERS, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 SEP 18 AM 10:29

Principal Place of Business  
7911 SW 152ND AVE., APT. #8  
MIAMI, FL 33193

Mailing Address  
7911 SW 152ND AVE., APT. #8  
MIAMI, FL 33193



2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

08012007 Chg-P CR2E034 (12/06)

4. FEI Number  
02-07775684

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATE SERVICES OF SOUTH FLORIDA, INC.  
1840 W. 49TH STREET  
SUITE #220-1  
HIALEAH, FL 33012

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

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 14, 2007

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 PD  
NAME HUERGO, ADRIAN N  
STREET ADDRESS 7911 SW 152ND AVE., APT. #8  
CITY-ST-ZIP MIAMI, FL 33193

☐ Delete

TITLE VD  
NAME MARTINEZ, VIVIAN G  
STREET ADDRESS 7911 SW 152ND AVE., APT. #8  
CITY-ST-ZIP MIAMI, FL 33193

☐ Delete

TITLE TD  
NAME NUNEZ, VIVIAN M  
STREET ADDRESS 7911 SW 152ND AVE., APT. #8  
CITY-ST-ZIP MIAMI, FL 33193

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

300109873593

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

VIVIAN NUNEZ

9/14/07 305-321-9576