
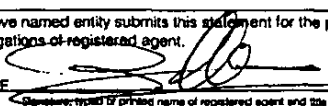
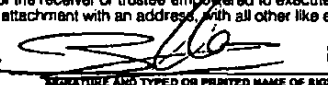


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2008 8:00 am
Secretary of State

05-01-2008 90201 043 ***150.00

DOCUMENT # P07000064932			
1. Entity Name U S JEWELRY, INC.			
Principal Place of Business 12959 WALSINGHAM ROAD LARGO, FL 33774 US		Mailing Address 9221 50TH STREET PINELLAS PARK, FL 33782 US	
2. Principal Place of Business - No P.O. Box # 12959 Walsingham Road		3. Mailing Address 9221 50th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Largo, FL		City & State Pinellas Park, FL	
Zip 33774	Country Pinellas	Zip 33782	Country Pinellas
6. Name and Address of Current Registered Agent PHAM, HOC 8305 VOLUSIA PLACE TAMPA, FL 33637		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  VUHUY TONTHAT DATE 5/23/08 <small>(Signature typed or printed name of registered agent and title # applicable. (NOTE: Registered Agent signature required when reinstating))</small>			
FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$850.00		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	P PHAM, HOC 8305 VOLUSIA PLACE TAMPA, FL 33637 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TONTHAT, VUHUY 9221 50TH STREET PINELLAS PARK, FL 33782 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHAM, PHONG C 5335 71ST AVENUE N. PINELLAS PARK, FL 33781 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
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
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
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:  VUHUY TONTHAT		DATE 4/29/08 (727) 596-6015 <small>Daytime Phone #</small>	