2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000098249

Entity Name: LIZ JEWELRY INC

City-St-Zip: MIAMI, FL 33172

FILED Mar 25, 2009 Secretary of State

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Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
11401 NW 12TH ST., SUITE 454-BOOTH 14 MIAMI, FL 33172			8410 WEST FLAGLEF MIAMI, FL 33144	8410 WEST FLAGLER # 108B MIAMI, FL 33144	
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
11401 NW 12TH ST., SUITE 454-BOOTH 14 MIAMI, FL 33172			8410 WEST FLAGLER # 108B MIAMI, FL 33144		
FEI Number	: 26-0847742	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
TINOCO, I 20521 SW MIAMI, FL	124TH PL.				
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (TINOCO, LUC) 20521 SW 124 MIAMI, FL 331	TH PL.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (TINOCO, ADOI 20521 SW 124 MIAMI, FL 331	TH PL.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TINOCO, VIVÌA) Delete NA IERI FALLRI VD. #L-220	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: LUCY TINOCO PD 03/25/2009