2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P92000008108 1. Entity Name



FILED Jan 12, 2007 08:00 AM Secretary of State

Principal Place of Business

1041 NE 180 TERRACE N MIAMI BCH, FL 33162 US

JEWÉLRY BY JOSHUA, INC.

Mailing Address

P.O. BOX 600538

N. MIAMI BCH, FL 33160 US



DO NOT WRITE IN THIS SPACE

01062007 No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0372727

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

-249-0055

1-10-07

6. Name and Address of Current Registered Agent

WEINBERG, JOSHUA 1041 NE 180 TERRACE NO MIAMI BCH, FL 33162

SIGNATURE: 120

DO NOT WRITE IN THIS SPACE

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 pointed name of registered agent and title 4 applicable. (NOTE: Registered Agent signature required when reinstating)					DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financi Trust Fund Contribution.	ng 🔲	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEINBERG, BETTY 1041 NE 180 TERRACE N MIAMI BCH, FL				U00000584342 01/12/07-80033-023 150.00
TITLE NAME STREET AODRESS CITY-ST-ZIP	STD WEINBERG, JOSHUA 1041 NE 180TH TERRACE N MIAMI BCH, FL				01/12/07-80033-023 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					