


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2008 08:00 AM
Secretary of State

DOCUMENT # P92000010423	
1. Entity Name PAYLESS JEWELRY #4, INC.	

Principal Place of Business 137 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441	Mailing Address 137 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441
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DO NOT WRITE IN THIS SPACE

01072008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0375739	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FARBSTEIN, DAVID R
8010 N UNIVERSITY DR
FORT LAUDERDALE, FL 33321

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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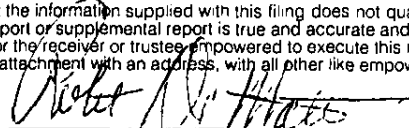
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD DIMATTINA, ROBERT A 14351 SUNSET LANE SOUTHWEST RANCHES, FL 33330
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LASORSA, ROBERT 1109 BELAIR DR. #2 HIGHLAND BEACH, FL 33487
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GAIEFSKY, WAYNE R 13841 OAK RIDGE DR DAVIE, FL 33325
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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01/17/08-80013-012 150.00

**DO NOT WRITE
IN THIS SPACE**

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:  **1/14/08** **954 5706331**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #