


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 26, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P93000048182</b> 1. Entity Name LAKELAND FINE JEWELERS, INC.	
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Principal Place of Business 3427 SOUTH FLORIDA AVENUE LAKELAND, FL 33803-4548	Mailing Address 3427 SOUTH FLORIDA AVENUE LAKELAND, FL 33803-4548
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**DO NOT WRITE IN THIS SPACE**



01202004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3198906	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

KAHN, JEFFREY A  
3427 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803-4548

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be</b> <b>Added to Fees</b>	U000000013584 01/26/04-80059-015 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAHN, JEFFREY A 3427 S FLORIDA AVE LAKELAND, FL 338034548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAHN, ELLEN R 3427 S FLORIDA AVE LAKELAND, FL 338034548
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Jeffrey A. Kahn Jeffrey A. Kahn 1/22/04 (863) 646-9337  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #