

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2007 08:00 A
Secretary of State

DOCUMENT # P94000039032

1. Entity Name
JERUSALEM JEWELERS, INC.



Principal Place of Business
**7480 W COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33319 US**

Mailing Address
**18252 CLEARBROOK CIRCLE
BOCA RATON, FL 33498**



03052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0500383	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**MAIMONI, BARBARA
18252 CLEARBROOK CIRCLE
BOCA RATON, FL 33498**

**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 printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

**U00000658384
03/15/07-80036-009 150.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAIMONI, YORAM 18252 CLEARBROOK CIRCLE BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAIMONI, BARBARA 18252 CLEARBROOK CIRCLE BOCA RATON, FL 33498
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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 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: Barbara R. Maimoni Barbara Maimoni

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/07

Date

Daytime Phone #