## 2003 FOR PROFIT CORPORATION

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)				FILED Apr 30, 2003 8:00 am Secretary of State
DOCUMENT # P9400079144  1. Entity Name RENAISSANCE GEMS INC.				94-30-2003 90016 045 ***150.00
7500 WEST COMMERCIAL BLVD. 75 BOOTH D-63 BG		Mailing Address 7500 WEST COMMERCIAL BOOTH D-63 LAUDERHILL FL 33319	BLVD.	11025555
2. Principal Place of Business		3. Mailing Address		-
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & Stat	e	City & State		4. FEI Number 65-0531086 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired.   \$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
CIARDINI	O JOSEPH A		Name	,
CIARDULLO, JOSEPH A 7500 WEST COMMERCIAL BLVD.			Street Address	(P.O. Box Number is Not Acceptable)
BOOTH D-63				
LAUDERHILL FL 33319			City	FL Zip Code
	named entity submits this statement for tions of registered agent.	r the purpose of changing its re	egistered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE .	Clearly wood winted a stational	MOTE.		A.M.
<u> </u>	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature requir	ed when reinstating) DATE
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	f State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CIARDULLO, JOSEPH A 7500 W. COMMECIAL BLVD. D-6 LAUDERHILL FL 33319	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CIARDULLO, DONNA 7500 W. COMMECIAL BLVD. D-6 LAUDERHILL FL 33319	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KINGAN, JEFFREY 7500 W COMMERCIAL BLVD LAUDERHILL FL 33319	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME		☐ Delete	TITLE NAME	Change Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	
TITLE NAME		☐ Delete	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

SIGNATURE:

MIPED AND TYPES OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR,

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 regulated by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with in address, with all other like empowered.