


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

114

DOCUMENT # P95000002778 1. Entity Name GERBER JEWELERS, INC.	
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FILED

04 JAN 27 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 1678 RIDGEWOOD AVE HOLLY HILL, FL 32117	Mailing Address 1678 RIDGEWOOD AVE HOLLY HILL, FL 32117
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01152004 No Chg-P CR2E034 (10/03) **04**

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3271940	Applied For <input type="checkbox"/> 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 GERBERMAN, FREDERICK M 1678 RIDGEWOOD AVE HOLLY HILL, FL 32117

**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, 2004 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	D GERBERMAN, FREDERICK M 1678 RIDGEWOOD AVE HOLLY HILL, FL 32117
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GERBERMAN, DEBORAH 1678 RIDGEWOOD AVE HOLLY HILL, FL 32117
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000028150410
02/03/04--01051--006 **150.00

**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)(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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-22-04 **386-673-6446**
Date Daytime Phone #



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Document Number

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Business Entity Name

GERBER JEWELERS, INC.

FEI Number

59327194

FEI Number Status

☐ Applied For ☐ Not Applicable ☒ CurrentCertificate of Status Desired ☐ Yes ☒ No \$8.75 each

Principal Place of Business

Address

1678 RIDGEWOOD AVE

Suite, Apt. #, etc.

City, State

HOLLY HILL

FL

Zip Code & Country

32117

Mailing Address

Address

1678 RIDGEWOOD AVE

Suite, Apt. #, etc.

City, State

HOLLY HILL

FL

Zip Code & Country

32117

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

GERBERMAN

FREDERICK

M

-or- RA Business Name

Address

1678 RIDGEWOOD AVE

Suite, Apt. #, etc.

City, State

HOLLY HILL

FL

Zip Code & Country

32117

US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

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Business Entity Name

GERBER JEWELERS, INC.

Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Officer/Director Name And Address

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

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Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

☐ List more than six Officers/Directors ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title
Officer/Director Signature *FRED BERBERMAN*

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