## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Sep 20, 2004 8:00 am DOCUMENT # P95000017756 Secretary of State 1. Entity Name 09-20-2004 90002 025 \*\*\*550.00 PORTFOLIO FINE JEWELRY, INC. Principal Place of Business Mailing Address 3801 W.LAKE MAZY BLVD. 3801 W.LAKE MAZY BLVD. 54073168 #171 LAKE MARY FL 32746 LAKE MARY FL 32746 2. Principal Place of Business 3. Mailing Address 1120 Town Purt We CR2E034 (4/04) Applied For 4. FEI Number 59-3303639 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent TŠIŘIGOTIS, TONY 467 CEDAR MILL PLACE LAKE MARY FL 32746 8. The above named entity submits this statement for the purpose of changing its r or both, in the State of Florida. I am familiar aistere the obligations of registered agent. FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE Delete THE Change ☐ Addition NAME TSIRIGOTIS, TONY NAME Tony Tsivicotis 1652 Kersley STREET ADDRESS 467 CEDAR MILL PLACE STREET ADDRESS CITY-ST-ZIP LAKE MARY FL 32746 CITY-ST-ZIP ☐ Delete TITLE **Change** ☐ Addition NAME TSIRIGOTIS, VICTORIA NAME 467 CEDAR MILL PLACE STREET ADDRESS STREET ADDRESS LAKE MARY FL 32746 CITY-ST-ZIP TITLE -- - Delete -TITLE . ☐ Addition ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE T/D F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of the receiver or this see amounted 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 atta ther like empowered

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