

2003 FOR PROFIT CORPORATION, UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P95000017756

1. Entity Name
PORTFOLIO FINE JEWELRY, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 21 PM 3:52

Principal Place of Business
**3801 W.LAKE MAZY BLVD.
#171
LAKE MARY FL 32746**

Mailing Address
**3801 W.LAKE MAZY BLVD.
#171
LAKE MARY FL 32746**



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

REINSTATEMENT

CHECK HERE IF MAKING CHANGES **03**

4. FEI Number **59-3303639**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

~~ADAMS, JR. RICHARD H. ESQ.
946 HIGHLAND AVENUE
ORLANDO FL 32803~~

7. Name and Address of New Registered Agent

Name **Tony Tsirigotis**
Street Address (P.O. Box Number is Not Acceptable) **467 Cedar Mill Place**
City **Lake Mary** FL Zip Code **32746**

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 _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete PTD TSIRIGOTIS, TONY 487 CEDAR MILL PLACE LAKE MARY FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete S TSIRIGOTIS, VICTORIA 487 CEDAR MILL PLACE LAKE MARY FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 800023511488 10/02/03--01043--007 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 800023511488 10/21/03--01158--017 **600.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Tony Tsirigotis **REINSTATED** **9903** **407-324-8920**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)