

2000 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 11, 2000 8:00 am
Secretary of State
 04-11-2000 90038 032 ***150.00

DOCUMENT # P96000061299

1. Entity Name

LENTIN JEWELERS, INC.

Principal Place of Business

845 S FEDERAL HWY
 DEERFIELD BEACH FL 33441

Mailing Address

845 S FEDERAL HWY
 DEERFIELD BEACH FL 33441-5751

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0682351

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GREEN, JODI B.
1499 W PALMETTO PARK RD
SUITE 300
BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name: **GREENSTEIN & KING CPAs PA**
 Street Address (P.O. Box Number is Not Acceptable)
7000 W. PALMETTO PARK ROAD
BOCA RATON
 City: **BOCA RATON** **FL** Zip Code: **33433**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
 NAME **CURTIS, VALERIE**
 STREET ADDRESS **845 S FEDERAL HWY**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

TITLE **DVS** ☐ Delete
 NAME **CURTIS, GAVIN**
 STREET ADDRESS **845 S FEDERAL HWY**
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☒ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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13. 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 11 or Block 12 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

VALERIE CURTIS
PRESIDENT

Date

4/6/00 (954) 421-3868

Daytime Phone #

CR2E034 (9/99)