## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000079206

PLANT CITY, FL 33565

City-St-Zip:

Entity Name: ATOZ LAPIDARY AND GEMS, INC.

FILED Apr 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5305 N. FIVE ACRE ROAD PLANT CITY, FL 33565 **Current Mailing Address: New Mailing Address:** 5305 N. FIVE ACRE ROAD PLANT CITY, FL 33565 FEI Number: 59-3041539 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROCK, CHARLES W 5305 N. FIVE ACRE ROAD PLANT CITY, FL 33565 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition BROCK, CHARLES W Name: Name: 5305 N FIVE ACRE RD Address: Address: City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: Title: ٧S Title: () Change () Addition () Delete Name: BROCK, JOHN Name: 5305 N FIVE ACRE RD Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES BROCK PRES 04/20/2009