## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 12, 2008 8:00 am Secretary of State

ANNUAL REPORT				Se	Secretary of State			
DOCUMENT # P9700081557  1. Entity Name STERLING'S JEWELRY & WATCH REPAIR, INC.				DAS.	•	30 017 ***150.0		
9401 W COLONIAL DRIVE 94 SUITE 100 SI		Mailing Address 9401 W COLONIAL DRIVE SUITE 100 OCOEE, FL 34761		40049				
2. Principal Place of Business - No.P.O. Box # 3. 1109 W. Colorual Dr. Suite, Apt. #, etc.		3. Mailing Address IIIO9 W. Colon Suite, Apt. #, etc.	11109 W. Colonial Dr.		18811 64111 18911 88111 8411	CR2E034 (12/06)		
City & State		City & State		02282008 4. FEI Number	Olig-r C		plied For	
Ococe, FL Oc		Owee,	e, FL		59-3633594		Applicable	
Zip 34	76 Prange  8. Name and Address of Current R	3476	Country Orange	5. Certificate of S	tatus Desired [	\$8.75 Add Fee Required		
Na				-1 · 1	sociate		•	
STANFORD, JERRY L CPA 1803 CROWN WAY ORŁANDO. FL 32804				dress (P.O. Box Number is		<b>?</b>		
ONDANDO	, 1 E 02004							
				ando		FL 328	210	
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 Paule Styring (NOTE: Registered Agent signature required when renstating)  DATE								
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.								
10.	OFFICERS AND D		11.		ANGES TO OFFICE	RS AND DIRECTORS		
NAME STREET ADDRESS CITY-ST-ZIP	LALLO, STERLING E 9401 W COLONIAL DRIVE, SUITE OCOEE, FL 347616903	<b>24-Delete</b>	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	LALLO STE 11109 W. Cok Ococe, FL	RLING E mind Dr. 34761	Change	Additlen	
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: \_

UND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-08

Daytme Phone #