2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004
Secretary of State

DOCUMENT# P97000087497

Entity Name: GOLDSMITH DESIGNER JEWELRY INC.

Current Principal Place of Business:

1812 S. HWY 77 #114
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

1812 S. HWY 77 #114
SUITE 114
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 59-3475479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADAMSON, JORGE D
1812 S. HIGHWAY 77
SUITE 114
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: ADAMSON, JORGE D
Address: 1406 MASSACHUSSETTS AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP ( ) Delete
Name: GOSE, MICHAEL E
Address: 1313 CAPRI DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ADAMSON, JORGE D
Address: 1406 MASSACHUSSETTS AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP (X) Change ( ) Addition
Name: GOSE, MICHAEL E
Address: 1313 CAPRI DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: SEC ( ) Change (X) Addition
Name: ADAMSON, NORA R
Address: 1406 MASS. AVE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: TRES ( ) Change (X) Addition
Name: GOSE, SELINA K
Address: 1313 CAPRI DR.
City-St-Zip: PANAMA CITY, FL 32405

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID ADAMSON P 01/20/2004

Electronic Signature of Signing Officer or Director — Date