FOR PROFIT CORPORATION

FILED Feb 27, 2008 8:00 am Secretary of State

UNIFC	KINI BOSINE	35 KEPUR	(I (UBR	()	•	
DOCUMENT # 1. Entity Name	P9700010471	9 %	S.£ .		02-27-2008 90016 001	. ***150.00
ARAX, INČ. D/B/A DAI	NIELIAN JEWELERS	<u>,</u>			-l /	, ,
DO NOT WRITE IN THIS SPACE					40033933	•
2. Principal Place of	3. Mailing Address			and the state of the Maria Allendaria		
106 NORTH COUNT Suite, Apt. #, etc.	106 NORTH COUNTY ROAD Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State	City & State			4. FEI Number	Applied For	
PALM BEACH, FL Zip Country		PALM BEACH, FL Zip Country			65-0801457	Not Applicable
33480	USA	33480	USA	-	5. Certificate of Status Desired	\$8.75 Additional Fee Required
•				7. Nam Name	ne and Address of Current Regis	stered Agent
DO NOT WRITE Str				VAHRAM DAN		
				Street Address (P.O. Box Number is Not Acceptable) 106 N COUNTY ROAD		
• •	N THIS SP	ACE		100 K 00 0111	1110/10	
				City PALM BEACH	FL.	Zip Code 33480
8. The above named	entity submits this s	tatement for the p	urpose of ch	anging its regis	stered office or registered agent, o	
•	am familiar with, and	accept the obligation	tions of regis	stered agent.	•	
SIGNATURESignatu	re, typed or printed name of	of registered agent and	title if applicable	/NOTE: Regist	ered Agent signature required when reinstat	ing) DATE
January 1	- May 1 Fee is \$150	.00	приновые	. (NOTE. Negist		
After May 1, Fee is \$550.00 Amended UBR is \$61.25					Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
Make Check Payable	to Florida Departn				Trade Land Contribution.	
10. TITLE	OFFICERS A	ND DIRECTORS	11.	TLE .	· · ·	
NAME	DANIELIAN, VAHRA	AM	1	ME		
STREET ADDRESS	106 N COUNTY RO			REET ADDRESS	S	
CITY-ST-ZIP TITLE	PALM BEACH, FL 3 SVD	33480		TY-ST-ZIP TLE		
NAME	DANIELIAN, TANIA			ME		
STREET ADDRESS	106 N COUNTY RC			REET ADDRESS	S .	
CITY-ST-ZIP TITLE	PALM BEACH, FL 3	33480		<u>TY-ST-ZIP</u> TLE		
NAME				ME		
STREET ADDRESS CITY-ST-ZIP				REET ADDRESS TY-ST-ZIP	DO NOT V	VRITE
TITLE			TIT	ſLE	IN THIS S	
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CITY-ST-ZIP				TY-ST-ZIP	^	
TITLE				TLE .		
NAME STREET ADDRESS			i	ME REET ADDRESS	s	
CITY-ST-ZIP			CI	TY-ST-ZIP		,
					stated in Section 119.07(3)(i), Florida S and that my signature shall have the s	
as if made under oat	th; that I am an officer of	or director of the corp	ooration or the	e receiver or trust	ee empowered to execute this report a h an address, with all other like empov	as required by
2	// .					
SIGNATURE: X	ATURE AND TYPED O	VAHRAM R PRINTED NAME	I DANIELIAN OF SIGNING			561) 655-4954 Daytime Phone #