

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000020354

1. Entity Name

DAVID ALEXANDER JEWELERS, INC.

FILED
Sep 21, 2001 8:00 am
Secretary of State

09-21-2001 90001 034 ***550.00

Principal Place of Business

1702 S DALE MABRY HWY.
TAMPA FL 33629

Mailing Address

1702 S DALE MABRY HWY.
TAMPA FL 33629

2. Principal Place of Business

1546 S. Dale Mabry Hwy

Suite, Apt. #, etc.

3. Mailing Address

1546 S. Dale Mabry Hwy

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Tampa FL
33629 USA

City & State

Tampa FL
33629 USA

4. FEI Number 65-0822723

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEISTAND, PAUL K
221 SECOND AVENUE NORTH
ST. PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP

D
NGUYEN, PHUC
1702 S DALE MABRY HWY.
TAMPA FL 33629

☐ Delete

TITLE
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STREET ADDRESS
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Phuc Nguyen
1546 S. Dale Mabry Hwy
Tampa FL 33629

☒ Change ☐ Addition

TITLE
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:

Phuc Nguyen President 5/6/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0353457

CR2E034 (10/00)