

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 91000 038 ***150.00

DOCUMENT # P98000055003

1. Entity Name
Nature's Jewels Inc.

Principal Place of Business 12975 S.W. 192 ST
Miami, FL. 33177

Mailing Address 12295 S.W. 151 ST
Miami, FL 33186

2. Principal Place of Business

3. Mailing Address 12975 S.W. 192 ST

Suite, Apt. #, etc.

City & State Miami, FL.

Zip 33177 **Country**

4. FEI Number 65-0842905

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
Julie Markiewicz

7. Name and Address of New Registered Agent

Name Julie Markiewicz

Street Address (P.O. Box Number is Not Acceptable) 12975 S.W. 192 ST

City Miami, FL. **FL** **Zip Code** 33177

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 Julie Markiewicz **DATE** 4/9/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **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 ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE Owner/President	<input checked="" type="checkbox"/> Delete
NAME Julie Reiter	
STREET ADDRESS 5900 S.W. 59 ST	
CITY-ST-ZIP Miami, FL. 33143	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Owner/President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME Julie Markiewicz	
STREET ADDRESS 12975 S.W. 192 ST.	
CITY-ST-ZIP Miami, FL 33177	
TITLE Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME Bruce Markiewicz	
STREET ADDRESS 12975 S.W. 192 ST	
CITY-ST-ZIP Miami, FL. 33177	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: Julie Markiewicz **DATE** 4/9/01 **305-969-4476**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)