2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 08:00 AM Secretary of State DOCUMENT # P98000068710 A. FINKELSTEIN'S JEWELERS, INC. Mailing Address Principal Place of Business 258 S UNIVERSITY DRIVE 258 S UNIVERSITY DRIVE PLANTATION, FL 33324 PLANTATION, FL 33324 CR2E034 (11/05) 04192006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0854819 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FINKELSTEIN, A 258 S. UNIVERSITY DRIVE PLANTATION, FL 33324 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE FINKLESTEIN, ALEX NAME U00000536959 STREET ADDRESS 258 S UNIVERSITY DRIVE 05/08/06-80115-003 150.00 CITY-ST-ZIP PLANTATION, FL 33324 NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this tiling 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address. FINKESTENS TEWELERS

Daytime Phone #

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR