FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jan 31, 2001 8:00 am Secretary of State DOCUMENT # P98000077385 1. Entity Name MONALISA FINE JEWELRY, INC. 01-31-2001 90066 046 ***150.00 Mailing Address Principal Place of Business 1180 SOUTH OCEAN BLVD 1180 SOUTH OCEAN BLVD APT 6E APT 6E UUU11305 **BOCA RATON FL 33432 BOCA RATON FL. 33432** 2. Principal Place of Business Mailing Address 666 South Fee Suite, Apt. #, etc._ DO NOT-WRITE IN THIS:SPACE -Suite. Apt. #, etc. City & State Applied For 4. FEI Number 65-0867437 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of New Registered Agent Name and Address of Current Registered Agent Name ASNES, RONALD S Street Address (P.O. Box Number is Not Acceptable) 433 PLAZA REAL SUITE 275 **BOCA RATON FL 33432** 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 PILE NOW!!! PEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Alina Buryak - Khaytov Finange Delete TITLE TITLE BURYAK-KHAYTOV, ALINA NAME STREET ADDRESS STREET ADDRESS 1200 SOUTH OCEAN BOULEVARD #2E Delray beach Florida 33483 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Delete TITLE TITLE ARthur Khaytov KHAYTOV, ARTHUR NAME NAME 1666 SOUTH FEDERAL HWY STREET ADDRESS 1200 SOUTH OCEAN BOULEVARD #2E STREET ADDRESS Delray beach Floricia 33483 CITY-ST-ZIP CITY-ST-7IP **BOCA RATON FL 33432** Addition □ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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 appearation with an additional properties.