

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000084741**

1. Entity Name

NC'S JEWELLERY U.S.A. INC.**FILED**
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90094 046 ***150.00

0283558

Principal Place of Business 7500 W. COMMERCIAL BLVD. WORLD JEWELRY CENTER D-53 FT. LAUDERDALE FL 33319	Mailing Address 7500 W. COMMERCIAL BLVD. WORLD JEWELRY CENTER D-53 FT. LAUDERDALE FL 33319
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2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0890668		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent ANDERSON, RODSON 2776 NW 47 LANE LAUDERDALE LAKES FL 33313	7. Name and Address of New Registered Agent Name PITTER, CARL S Street Address (P.O. Box Number is Not Acceptable) 7447 NORTH WEST 57TH STREET City TAMARAC FL Zip Code 33319
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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 *Leard Stiller* DATE 4-30-01
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. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COKE, NEVILLE L 7500 W COMMERCIAL BLVD FT LAUDERDALE FL 33319 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 another like empowered.

SIGNATURE: *Neville L. Coke* **NEVILLE L. COKE** **PRESIDENT** Date 4/15/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)