

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000099247

1. Entity Name

STAN'S JEWELRY, INC.

FILED

Jan 24, 2000 8:00 am  
Secretary of State

01-24-2000 90029 029 \*\*\*150.00

Principal Place of Business

Mailing Address

3161 W OAKLAND PARK BLVD  
OAKLAND PARK FL 33311

9892 NW 35TH STREET  
CORAL SPRINGS FL 33065-2803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0879083

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KOPTIEV, STANISLAW  
9892 NW 35TH STREET  
CORAL SPRINGS FL 33065

Name

STANISLAW Koptiev

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

3161 W OAKLAND PARK BLVD  
OAKLAND PARK FL

City

FL

Zip Code 33311

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

Stanislav Koptiev STANISLAW KOPTIEV

01.17.00

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME STANISLAW, Koptiev  
STREET ADDRESS 9892 NW 35TH ST  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE STANISLAW Koptiev  
NAME  
STREET ADDRESS 4725 NW 99 Lane  
CITY-ST-ZIP Coral Spring FL 33076

TITLE  
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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:

Stanislav Koptiev

01/17/00 (954) 731-7412

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #