2004 FOR PROFIT CORPORATION

SIGNATURE: (

ANNUAL DECYDI (AD)								, FILED				
1. Entity Nam	ie	# P990008013	4				Feb 18, 2004 08:00 AM Secretary of State					
EPEL'S JEWELRY, INC.							7	~~~	i comi j	01 200		
Principal Place of Business Mailing Address							7					
60 NW 12TH AVENUE, SUITE A MIAMI FL 33128			60 NW 12TH AVENUE, SUITE A MIAMI FL 33128									
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite. Apt. #, etc.			<u> </u>	MOORE	CR2E03	34 (11/03)	pplied Far		
City & State			City & State			-	4. 7	65-0948	158	<u> </u>	ot Applicable	
Zip	Zip Country			Zip Coun			5.	Certificate of Status Desire	d 🔲	\$8.75 Ad Fee Require		
	6. Name	and Address of Current	Registered	Agent			7. 1	Name and Address of Ne	w Registere	d Agent	· · · · · · · · · · · · · · · · · · ·	
(mp)=	T DAILA	MCOBO				Name						
1 06	ILBAUM, VW 12TH MI FL 33	JACOBO I AVENUE, SUITE A 128		Street Address			(P.O. E	Box Number is Not Accept	able)		<u></u>	
,,,,,						City				Zip Coc	le	
						}			F	<u> </u>		
	named entitions of regis	ty submits this statement for tered agent.	r the purpos	se of chariging its	register	ea office or registi	erea ag	jent, or both, in the State o	i rionga. : ai	n ramiliar with	, and accept	
SIGNATURE	Signature, typed	or printed name of registered agent a	and title if applic	able (NOT	E Registere	d Agent signature requir	ed when n	oinstating)	DATE			
F	ILE NOW!	!! FEE IS \$150.00	A sph sec. ",									
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaign Trust Fund Contrib			00 May Be d to Fees	
10.		OFFICERS AND	DIRECTOR	S	11.		ΑĹ	DDITIONS/CHANGES TO	OFFIÇERS A	ND DIRECTOR	SIN 11	
atre	D			☐ Delete	חזנ	,				☐ Change	Addition	
NAME	EPELBAUM, JACOBO				NAM emb	EET ADDRESS		U00000055927 02/18/04-80024-002 150.00				
STREET ADDRESS CITY-ST-ZIP	1			CITY				02/18/04-80024-002 150.00				
ILLFE	D	-		☐ Delete	TITL	Ε				☐ Change	Addition	
NAME	1	M, RAQUEL			NAN							
STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS 60 NW 12TH AVENUE, SUITE A DITY-ST-ZIP MIAMI FL 33128				ı	EET ADDRESS '-ST-ZIP						
TITLE				☐ Delete	TITL	Ε	_			☐ Change	Addition	
NAME					NAM	- 1						
STREET ADDRESS CITY-ST-ZIP						EET AODRESS '-ST-ZIP						
TITLE				☐ Delete	TITL	Ε		_ 		☐ Change	Addition	
NAME					NAM	1						
STREET ADDRESS GITY-SI-ZIP						EET ADDRESS '-ST-ZIP						
TITLE				☐ Delete	TITL				· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition	
NAME					NAA	ae a						
STREET ADDRESS CITY-ST-ZIP						EET ADDRESS (-ST-ZIP						
TITLE	ļ			Delete	TITL			<u> </u>	·······	Change	Addition	
NAME					NAN	1					—	
STREET ADDRESS					1	EET ADDRESS						
CITY-ST-ZIP			Mater BW			/-ST-ZIP	Casile	110.07/2\(C) Florido Cirlo	hoo I formbre	nortify that the	information	
12. Thereby indicated	certify that the on this repo	ne information supplied with ort or supplemental report is the receiver or trustee empt	this filing of true and a	ioes not qualify fo courate and that	n the exe my signa	emption stated in stated i	section e same	i 19.07(3)(i), Florida Statu legal effect as if made un	tes, i turther o der oath; thai	erury that the tam an office	r or director	
of the co	rporation of t I, or on an at	the receiver or trustee emportachment with an adultess,	wii yan cu ie	Lilike embowered	A.							
SIGNAT	FIIDE:	Clary US	all	aim	RA	QUEL F	oo h	BAIM 2-16-	2004	3053	24216	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DOLLAR DELLE DESCRIPTION DELLE DELL