2001 SNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S08793 1. Entity Name J & J JEWELRY, INC.						Mar 09, 2001 8:00 a Secretary of State 02-20-2001 90063 006 ***150.00			
Principal Pla 14706 SW 56 MIAMI FL 3311		Mailing Address 14706 SW 56 ST. MIAMI FL 33185-4070							
2. Principal	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State			4.	FEI Number	65-0235371		Applied For
Zip	Country	· Zip	Countr		5.	5. Certificate of Status Desired S8.75 Additional Fee Required			
	6. Name and Address of Current	Registered Agent	<u></u>		7.	Name and Ac	dress of New Regist		
POST CAL	BRERA; JUAN		0.00	= Name					
776	S SW 75TH AVE MI FL 33143			Street Addr	ress (P.O. (Box Number is	s Not Acceptable)		
				City				FL Zip Co	de .
	e rame entity submits this statement to	the purpose of changing its PRE5.	register	ed office or req	gistered ag	gent, or both, i	in the State of Florida.	olai	
SIGNATURE	Signature, types of princip rame of registered agent		E: Registere	d Agent signature re	equired when r	einstating)	- 01/3	AV.	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW! After MAY 1, 200 Make Check Payabi			101 Fee	will be \$550.			on Campaign Financin Fund Contribution.		00 May Be ad to Fees
11.	OFFICERS AND		12.		AD	DITIONS/CH	ANGES TO OFFICERS	AND DIRECTO	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CABRERA, JUAN 7765 SW 75TH AVE MIAMI FL 33143	. □ Delete					· .	Change	nostrippy (10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		l l				☐ Change	Addition &
TITLE NAME STREET ADDRESS:	الناب منصفتين كالناس برياض بدانتا تتاليقا بالرياس يراناها	☐ Delete	TITLE NAME		·		و حدیده	☐ Change	Addition
C/TY-ST-ZIP			CITY-	ST-ZIP			<u> </u>	<u> </u>	• • •
NAME STREET ADDRESS CITY-ST-ZIP		Delote		, ,				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		1	.,			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Λ	☐ Detete	TITLE NAME STREE CITY-1	T ADDRESS		•		☐ Change	Addition
13. I hereby of indicated of the correction changed,	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emper or on an attachment with an address with URE:	this filing does not qualify for kive and accurate and that m where to execute this report a try all other like empowered.	ry signatu as require	nption stated in ure shall have t ed by Chapter	n Section 1 the same to 607, Florid	19.07(3)(i), Floagal effect as the Statutes; and	if made under oath; the ad that my name appear	certify that the leat I am an officer ars in Block 11 or	or director Block 12 if