## FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91839 014 \*\*\*150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam UNITED	JEWELER		V				70051021				
Principal Place 7828 SEMINO UNITE 83 SEMINOLE, FI	OLE MALL	US	Mailing Address 7828 SEMINOLE MALL UNITE 83 SEMINOLE, FL 33772 US			111		iibii bibii	Bláil <b>Bib</b> it i	11211 Stait 1221	ł
2. Principal Place of Business			3. Mailing Address Suite, Apt. #, etc.								
Suite, Apt. #, etc. City & State			City & State			CHECK HERE IF MAKING CHANGES  4. FEI Number Applied For					7
			Zip	••••••••••••••••••••••••••••••••••••••	59-3052051			Not Applicable			
Zip 	Country				5. Certificate of Status L			S8.75 Additional Fee Required			1
	and Address of Current	Registered Agent		Name	-7-N	tame and Address of New Regis	tered Ag	ent		1	
VAN NGUYI 7828 SEMIN UNITE 83 SEMINOLE,	IOLE MALL		• •		Street Address (	P.O. B	ox Number Is Not Acceptable)				1
l					City		<del></del>	FL	Zip Code	<del></del> -	1
	named entiti ions of regist		the purpose of changing its	registere	ed office or register	ed ag	ent, or both, in the State of Florida.	l am far	nlliar with,	and accept	1
SIGNATURE Signature, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
After	May 1: 201	ii FEE IS \$150:00 33 Fee Will be \$550:00 > Florida Department o	f State	<del>-</del>			Election Campaign Financi     Trust Fund Contribution.	ng 🗆		0 May Be to Fees	
10.		OFFICERS AND		11.		ΩA	DITIONS/CHANGES TO OFFICER				1
TITLE NAME STREET ADDRESS CITY-ST-ZP	D NGUYEN, 7270 PEB LARGO, F	BLE BENETT LANE	Delete	A				L	] Change	☐ Addition	En34 (10/02
TITLE NAME STREET ADDRESS CITY-ST-ZP		HONG THI BLE BENETT LANE L 33777	☐ Delete	A				C	] Change	Addition	3
TITLE			☐ De lete	1016					Change	☐ Addition	1_
NAME STREET ADDRESS CITY-ST-ZP				18	E ET ADORESS -ST -21P						
TITLE NAME STREET ADDRESS CITY-ST-2P	li I		□ Delete	H -	Į.			C	] Change	☐ Addition	
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CITY-ST-2IP TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STREE	ET ADDRESS			C	Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											
SIGNATURE: LAUNGUYEN 4/24/03 (727)397-5811  SIGNATURE AND PIPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  SIGNATURE AND PIPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Carrier Propriet											