

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000155824

Entity Name: KING OF BIJOUX LLC**Current Principal Place of Business:**C/O FLORIDA MALL
8001 S. ORANGE BLOSSOM TRAIL, #1208
ORLANDO, FL 32809**Current Mailing Address:**12225 AUGUSTA WOODS CIRCLE
ORLANDO, FL 32824 US**FEI Number:** 83-1016118**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MATOS CARIOCA, ANA KARINE
12225 AUGUSTA WOODS CIRCLE
ORLANDO, FL 32824-9032 US*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:** MATOS CARIOCA, ANA KARINE

04/28/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name DE OLIVEIRA CALDAS, GILBERTO
Address 1083 S. HIAWASSEE ROAD 628
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name TRISTAO, RENATO
Address 1083 S. HIAWASSEE ROAD 628
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name CORREIA DE CALDAS JR, JOSE
Address 1083 S. HIAWASSEE ROAD 628
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name LUNA PEREIRA, MARCO ANTONIO
Address 278 AV. SAGITARIO APT 26 BL 23
City-State-Zip: BARUERI SAO PAULO 06473073

Title MGR
Name MATOS CARIOCA, ANA KARINE
Address 12225 AUGUSTA WOODS CIRCLE
City-State-Zip: ORLANDO FL 32824-9032

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANA KARINE MATOS CARIOCA

MGR

04/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date