## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

% Marvin Newman

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # J97767**

1. Corporation Name

Principal Place of Business % MARVIN NEWMAN

STARVIN' MARVIN JEWELRY, INC.

18861 BISCAYNE BLVD., SUITE C-2 18861 BISCAYNE BLVD., SUITE C-2 DO NOT WRITE IN THIS SPACE NORTH MIAMI BEACH FL 33180 NORTH MIAMI BEACH FL 33180 3. Date Incorporated or Qualifed 10/16/1987 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 65-0014644 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired П Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\overline{}$ Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes the current year Intangible Zip Country □No 30 Personal Property Tax. 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 NEWMAN, MARVIN 82 Street Address (P.O. Box Number is Not Acceptable) 18861 BISCAYNE BLVD. SUITE C-2 83 NORTH MIAMI BEACH FL 33180 Zip Code 84 85 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. , 🛄 DELETE ☐ Change 1.1 TITLE TITLE NEWMAN, MARVIN 1.2 NAME NAME 21190 MAINSAIL CIRCLE #12A 1.3 STREET ADDRESS STREET ADDRESS N MIAMI BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIF Addition □ DELETE 21 TITLE ☐ Change TITLE 2.2 NAME NEWMAN, MARVIN NAME 21190 MAINSAIL CIRCLE @12A 2.3 STREET ADDRESS STREET ADDRESS N MIAMI BEACH FL 2.4 CITY-ST-ZiP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY+ST-ZIP CITY-ST-ZIP

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

4.1 TITLE

4. 2 NAME

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

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Addition

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Addition

FILED

May 01, 1999 8:00 am Secretary of State

05-01-1999 90090 004 \*\*\*150.00

CR2E034 (11/98)