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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M45110

(7)

Mailing Address

JESUS JOYERIA INC.

Principal Place of Business

FILED Mar 14 1997 8:00am Secretary of State



8622 W FLAGLER 8T MIAMI FL 33144			6622 W FLAGLER ST Miami Fl 33144-2922								
								3. Date Incorporated or Qualified 01/21/1987	3a. Da	ate of Last I	Report
2. Principal Place of Business			2a. M	2a. Mailing Address				4. FEI Number			pplied f or
21			26					59-2775465		N	ot Applicable
Sulte, Apt. #, etc.			27 St				5. Certificate of Status Desired Security \$8.75 Additional Fee Required				
City & State			28 Ci	City & State			Election Campaign Financing Trust Fund Contribution Added to Fees				
Zip		Country	— i	Zip Count				8. This corporation has liability for intengible tax under s. 199.032,			
24	25 9. Name and Address of Current			29 30				Florida Statutes Y Yes No 10. Name and Address of New Registered Agent			
001		IO ADDIES OF CUIT	ent Registere	eo Agent		31	Name	10. Name and Address of New Re	gistered	Agent	
	MEZ, JESUS				Ľ	"	Name				
315 SW 62 CT MIAMI FL 33144					82 Street Addr			ress (P.O. Box Number is Not Acceptab	ole)		
MIN	MI FE 33 144				5	33					
					E	4	City		FL	85 Zip	Code
office of r	registerea agen	s of Sections 607.05 t, or both, in the Stat and accept the obti	e of Florida. I	Such change was	authorized	bγ	the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpoco of	changing ointment as	its registered s registered
SIGNATURE	Signalure, typed or p	printed narue of registered a	gent and title if ap	plicable (NO	TE Registered A	Ager	nt signature requ	vired when reinstalling)	DATE		
12.		OFFICERS AI	ND DIRECTO		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	D	A		DELETE	1.1 TITL	E				☐ Change	Addition
NAME	GOMEZ, JE				1.2 NAM	ΙE					
STREET ADORESS	315 SW 62	CI			1.3 STRE	ET a	ADDRESS				
CITY-ST-ZIP	MIAMI FL			Descre	1.4 CITY		T - ZIP				
TITLE				L_J DELETE	2.1 TITLI					Change	Addition
NAME CTOTET ADDOCCO					2.2 NAM						
STREET ADDRESS							ADDRESS				
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NAME					3.2 NAM					orange	L Addition
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					3.4. CITY						
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NAME					4. 2 NAM	Æ	1	() () () () () () () () () ()			
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NAME					5.2 NAM	E					
STREET ADDRESS					5.3 STRE	ET A	ADDRESS				
CITY-ST-ZIP				T bereve	5.4 CITY	_	- ZIP				
TITLE				DELETE	6111111		İ			☐ Change	Acdition
NAME OTOTET ADDRESS					6.2 NAM						
STREET ADDRESS							ADDRESS				
City-St-ZiP	ov certify that th	e information supplie	an with this G	ling dage not avail	6.4 CITY	- ST	- ZIP	d in Section 119.07(3)(i), Florida Statutes	1 feetbar	nortifications	the
Information	n in dic aled on 1 ffice r o r director	inis annual report or	supplements if the receive	il annual report is t r or trustee empoy	true and ac-	CHI	rate and that	of in Section 19.07(3)(), Florida Statutes t my signature shall have the same legal rt as required by Chapter 607, Florida St	affort as	il made un	ider noth: that