

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Jeffrey B. Winkler  
Secretary of State  
1995

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 MAY -1 AM 11:22

DOCUMENT # **P94000034278 (9)**

**CERTIFIED ESTATE AND JEWELRY BUYERS, INC.**

36 NORTHEAST 1ST ST  
SUITE 131  
MIAMI FL 33132

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SUITE 131  
MIAMI FL 33132

21	22	23	24	25	26	27	28	29	30	3. Date of Report (Corporate Fiscal Year)	3a. Date of Last Report
										05/06/1994	
										4. Filing Agent <i>APPL FEE FOR 65-0561661</i>	Applied For Paid Applicable
										5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
										6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
										8. This corporation reports that the information provided on this report is true and correct.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
COHEN, MARK D 121 NE FIRST ST SUITE 600 MIAMI FL 33131				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

11. Pursuant to the provisions of Sections 600.01, 600.02 and 600.03, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and registered agent for both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby, I hereby affirm the appointment of registered agent. I am familiar with and accept the obligations of the Secretary of State, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ALTERNATE CHANGES TO OFFICERS AND DIRECTORS ONLY	
NAME	D STRAUSS, FREDERICK 36 NE 1ST ST MIAMI FL 33132	1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DATE APPOINTED		2. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		3. CITY, STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DATE APPOINTED		5. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		6. CITY, STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		7. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DATE APPOINTED		8. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		9. CITY, STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		10. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DATE APPOINTED		11. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY		12. CITY, STATE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. This Secretary affirms that the information supplied with this filing is accurately furnished and does not qualify for the exemption (absent any notice) under Florida Statutes. That this is true, that the information is complete and that the information 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 this corporation or the treasurer or a person empowered to receive this report as required by Chapter 600, Florida Statutes, and that my name appears on the back of this report as required by Florida Statutes.

SIGNATURE: *FREDERICK J. STRAUSS*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-95 905-371-1161