FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 153296 (9)

1. Corporation Name
KIRK JEWELERS INC.

Principal Place of Business
132 E FLAGLER ST
MIAMI FL 33131

Mailing Address
132 E FLAGLER ST
MIAMI FL 33131

3. Date Incorporated or Qualified: **12/04/1947**
3a. Date of Last Report: **07/20/1995**

4. FEI Number: **59-0574980** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24
Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29
Country 30

9. Name and Address of Current Registered Agent

NEWBAUER, JULIAN H.
132 E FLAGLER ST
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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) DATE ______

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	**TP**	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	**NEWBAUER, JULIAN H.**		1.2 NAME	
STREET ADDRESS	**132 E FLAGLER ST**		1.3 STREET ADDRESS	
CITY-ST-ZIP	**MIAMI FL**		1.4 CITY-ST-ZIP	
TITLE	**VS**	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	**NEWBAUER, JUNE**		2.2 NAME	
STREET ADDRESS	**132 E. FLAGLER ST.**		2.3 STREET ADDRESS	
CITY-ST-ZIP	**MIAMI FL**		2.4 CITY-ST-ZIP	
TITLE	**AS**	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	**NEWBAUER, ALISA J.**		3.2 NAME	
STREET ADDRESS	**132 E FLAGLER STREET**		3.3 STREET ADDRESS	
CITY-ST-ZIP	**MIAMI FL**		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE: Julian H. Newbauer 2-1-96 (305)371-1821
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)