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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 22, 1999 8:00 am  
Secretary of State

02-22-1999 90019 039 \*\*\*150.00

DOCUMENT # 456248

1. Corporation Name  
BIJOUX TERNER, INC.

Principal Place of Business

777 NW AVE 30045  
3-66-46  
MIAMI FL 33126  
US

Mailing Address

777 NW 72 AVE 30045  
3-66-46  
MIAMI FL 33126  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7441 NW 8 St.

Suite, Apt. #, etc.

Bay K

City & State

Miami, FL 33126

Zip

33126 25 Dade

2a. Mailing Address

26 7441 NW 8 St.

Suite, Apt. #, etc.

27 Bay K

City & State

28 Miami FL

Zip

29 33126

Country

30 Dade

3. Date Incorporated or Qualified

08/05/1974

4. FEI Number

59-1548183

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 owes the current year Intangible  
Personal Property Tax.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

TERNER, SALOMON  
777 NW 72 AVE 30045  
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name

Salomon Turner

82 Street Address (P.O. Box Number is Not Acceptable)

7441 NW 8 St. Bay K

83

84 City Miami

FL

85 Zip Code

33126

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

TITLE D ☐ DELETE

TERNER, SALOMON

STREET ADDRESS 777 NW 72 AVE SUITE 30045

CITY-STATE-ZIP MIAMI FL

TITLE S ☐ DELETE

PAPIR, ROSA TERNER

STREET ADDRESS 2901 S. BAYSHORE DRIVE APT. 9-B

CITY-STATE-ZIP MIAMI FL

TITLE P ☐ DELETE

TERNER, SALOMON

STREET ADDRESS 777 NW 72 AVE SUITE 30045

CITY-STATE-ZIP MIAMI FL

TITLE ☐ DELETE

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Salomon Turner ☒ Change ☐ Addition

1.2 NAME 7441 NW 8 St. Bay K

1.3 STREET ADDRESS Miami, FL 33126

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE Salomon Turner ☒ Change ☐ Addition

3.2 NAME 7441 NW 8 St. Bay K

3.3 STREET ADDRESS Miami, FL 33126

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Salomon Turner, President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/98

Date

(305) 266-9000

Daytime Phone #

CR2E034 (1/98)