



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90426 028 \*\*\*150.00

<b>DOCUMENT # 250867</b> 1. Entity Name <b>MAYOR'S JEWELERS OF FLORIDA, INC.</b>					
Principal Place of Business <b>14051 NORTHWEST 14TH STREET SUNRISE, FL 33323</b>			Mailing Address <b>14051 NORTHWEST 14TH STREET SUNRISE, FL 33323</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>59-0975486</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEINSTEIN, MARC 14051 NW 14 ST SUNRISE, FL 33323		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Svp/cao/sec <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST RAHM, ALBERT J II 14051 NW 14 ST SUNRISE, FL 33323		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Retail <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAHM, ALBERT J II 14051 NW 14 ST SUNRISE, FL 33323		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/CEO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Thomas A. Andruskevich 1405 NW 14th Street Sunrise, FL 33323	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP/COO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Joseph A. Keifer III 14051 NW 14th Street Sunrise, FL 33323	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP/CFO/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition John Ball 14051 NW 14th Street Sunrise, FL 33323	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Financial Reporting <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Paul M. Nobel 14051 NW 14th Street Sunrise, FL 33323	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/22/04 954-846-2821 Daytime Phone #		

Attachments #250867

**MAYOR'S JEWELERS OF FLORIDA, INC.  
OFFICER LISTING  
DOCUMENT # 250867**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	GROUP VP FINANCE	ADDITION
NAME	MARCO PASTERIS	
BUSINESS ADDRESS:	14051 NW 14th STREET	
CITY-ST-ZIP	SUNRISE, FL 33323	

TITLE	GROUP VP MARKETING	ADDITION
NAME	DIANE OLIVER	
BUSINESS ADDRESS:	14051 NW 14th STREET	
CITY-ST-ZIP	SUNRISE, FL 33323	

TITLE	VP MERCHANDISING	ADDITION
NAME	AIDA ALVAREZ	
BUSINESS ADDRESS:	14051 NW 14th STREET	
CITY-ST-ZIP	SUNRISE, FL 33323	

TITLE	GROUP VP SUPPLY CHAIN OPERATIONS	ADDITION
NAME	JOHN C. ORRICO	
BUSINESS ADDRESS:	14051 NW 14th STREET	
CITY-ST-ZIP	SUNRISE, FL 33323	

TITLE	GROUP VP STRATEGY & BUSINESS INTEGRATION	ADDITION
NAME	CARLO CODA-NUNZIANTE	
BUSINESS ADDRESS:	14051 NW 14th STREET	
CITY-ST-ZIP	SUNRISE, FL 33323	