

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

PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 271861

1. Corporation Name
RAINBOW JEWELRY INC

Principal Place of Business

2300 CORAL WAY
 #200
 MIAMI FL 33145
 US

Mailing Address

2300 CORAL WAY
 #200
 MIAMI FL 33145
 US

2. Principal Place of Business

21 2300 Coral Way
 Suite, Apt #, etc.

22 Suite # 200
 City & State

23 Miami Florida
 Zip Country

24 33145

25

2a. Mailing Address

26 2300 Coral Way
 Suite, Apt #, etc.

27 Suite # 200
 City & State

28 Miami Florida
 Zip Country

29 33145

30

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES INC
 2300 CORAL WAY
 #200
 MIAMI FL 33145

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]

AMADA CABTIERA LOPEZ, President

(NOTE: Registered Agent signature is required when changing agent.)

(01)

12. OFFICERS AND DIRECTORS

TITLE [] DELETE

NAME PD MORJAIN, YAKO
 STREET ADDRESS 8777 COLLINS AVENUE
 CITY-ST-ZIP MIAMI BEACH FL

TITLE [] DELETE

NAME TD MORJAIN, CLARA
 STREET ADDRESS 8777 COLLINS AVENUE
 CITY-ST-ZIP MIAMI BEACH FL

TITLE [] DELETE

NAME SD MORJAIN, SAMUEL
 STREET ADDRESS 2014 NE 122 RD
 CITY-ST-ZIP NORTH MIAMI FL

TITLE [] DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE [] DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE [] DELETE

NAME
 STREET ADDRESS
 CITY-ST-ZIP

13.

11 TITLE [] Change [] Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE [] Change [] Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE [] Change [] Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE [] Change [] Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE [] Change [] Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE [] Change [] Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

500002806225-0
 -03/15/99-01121-013
 ****150.00 ****150.00

3/11

APPROVED AND FILED

99 MAR 11 PM 3:09

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/15/1963

4. FEI Number

59-1006908

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

10. Name and Address of New Registered Agent

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YAKO MORJAIN, President

3/4/99

Date of Filing

0017201

CR2E034 (11/98)