

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

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

02-22-1999 90018 004 \*\*\*150.00



DOCUMENT # 292782

1. Corporation Name  
FERGUSON JEWELERS, INC.

Principal Place of Business

1114 N. FLAGLER AVE  
HOMESTEAD FL 33030  
US

Mailing Address

1114 N. FLAGLER AVE  
HOMESTEAD FL 33030  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1965

4. FEI Number

59-1100217

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

2. Principal Place of Business

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

25

29

Zip

Country

30

9. Name and Address of Current Registered Agent

FERGUSON, GARY A.  
23705 SW 153 CT.  
REDLANDS FL 33032

10. Name and Address of New Registered Agent

81 Name FERGUSON GARY A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
1555 FLAMINGO COURT  
83 HOMESTEAD  
84 City FL 85 Zip Code 33030

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	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
P	FERGUSON, GARY ALLEN	23705 SW 153 CT.	REDLANDS FL 33030	<input type="checkbox"/>
S	FERGUSON, KATHY	23705 SW 153 CT	HOMESTEAD FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
1.1	TITLE			<input type="checkbox"/>
1.2	NAME			<input type="checkbox"/>
1.3	STREET ADDRESS			<input type="checkbox"/>
1.4	CITY-STATE-ZIP			<input type="checkbox"/>
2.1	TITLE			<input type="checkbox"/>
2.2	NAME			<input type="checkbox"/>
2.3	STREET ADDRESS			<input type="checkbox"/>
2.4	CITY-STATE-ZIP			<input type="checkbox"/>
3.1	TITLE			<input type="checkbox"/>
3.2	NAME			<input type="checkbox"/>
3.3	STREET ADDRESS			<input type="checkbox"/>
3.4	CITY-STATE-ZIP			<input type="checkbox"/>
4.1	TITLE			<input type="checkbox"/>
4.2	NAME			<input type="checkbox"/>
4.3	STREET ADDRESS			<input type="checkbox"/>
4.4	CITY-STATE-ZIP			<input type="checkbox"/>
5.1	TITLE			<input type="checkbox"/>
5.2	NAME			<input type="checkbox"/>
5.3	STREET ADDRESS			<input type="checkbox"/>
5.4	CITY-STATE-ZIP			<input type="checkbox"/>
6.1	TITLE			<input type="checkbox"/>
6.2	NAME			<input type="checkbox"/>
6.3	STREET ADDRESS			<input type="checkbox"/>
6.4	CITY-STATE-ZIP			<input type="checkbox"/>

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: GARY FERGUSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/99

Date

305-247-4535

Daytime Phone #

CR2E034 (11/98)