

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **309995** (9)

1. Corporation Name:  
**ROSENTHAL JEWELERS SUPPLY CORP.**



Principal Place of Business: **138 NE 1ST AVE. MIAMI FL 33132**  
Mailing Address: **138 NE 1ST AVE. MIAMI FL 33132**

21	2. Principal Place of Business	26	2a. Mailing Address	3	3. Date Incorporated or Qualified	3a.	3a. Date of Last Report
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	4.	10/14/1966		04/25/1995
23	City & State	28	City & State	4.		Applied For	
24	Zip	29	Zip	5.	59-1153603	Not Applicable	
25	Country	30	Country	5.			\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent				6.			\$5.00 May Be Added to Fees
10. Name and Address of New Registered Agent				6.			
11. Pursuant to the provisions of Sections 607 (7)(d) and 16 (2), Florida Statutes, the above named corporation limits this statement for the purpose of changing its registered office or registered agent to that of the State of Florida. Section 607 (7)(d) requires that this statement be signed by the corporation's board of directors, thereby, accept the appointment as registered agent. I am familiar with and accept the appointment of Section 607 (7)(d) of the Florida Statutes.				81.			
SIGNATURE: <i>Daisy Adouth</i> DAISY-ADOUTH				82.	Street Address (P.O. Box Number is Not Acceptable)		
				83.	10155 COLLINS AVE, APT. 804		
				84.	City BAL HARBOUR	FL	85. Zip Code 33154

81.	Name	82.	Street Address (P.O. Box Number is Not Acceptable)
83.		83.	10155 COLLINS AVE, APT. 804
84.	City BAL HARBOUR	FL	85. Zip Code 33154

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P ROSENTHAL, LUIS	11. TITLE	
NAME	5825 COLLINS AVE	12. NAME	
STREET ADDRESS	MIAMI BCH, FL 00000	13. STREET ADDRESS	
CITY, ST, ZIP	VD	14. CITY, ST, ZIP	
TITLE	ADOUTH, DAISY	21. TITLE	
NAME	138 NE 1ST AVE.	22. NAME	
STREET ADDRESS	MIAMI, FL 00000	23. STREET ADDRESS	
CITY, ST, ZIP	VST	24. CITY, ST, ZIP	
TITLE	ADOUTH, RAPHAEL	31. TITLE	
NAME	138 NE 1ST AVE.	32. NAME	
STREET ADDRESS	MIAMI, FL 00000	33. STREET ADDRESS	
CITY, ST, ZIP		34. CITY, ST, ZIP	
TITLE		41. TITLE	
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY, ST, ZIP		44. CITY, ST, ZIP	
TITLE		51. TITLE	
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY, ST, ZIP		54. CITY, ST, ZIP	
TITLE		61. TITLE	
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY, ST, ZIP		64. CITY, ST, ZIP	

14. I do hereby certify that the information reported with this filing is verifiably furnished and does not qualify for the exemption stated in Section 119 (2)(3)(b), Florida Statutes. I further certify that the information included on this form of report is complete 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: *Daisy Adouth* DAISY-ADOUTH

4-16-96

CR2E034 (12/95)