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

Mailing Address

123 N 20TH STREET

C/O PAUL M BYRNE

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 466521

1. Corporation Name

Principal Place of Business

123 N 20TH STREET C/O PAUL M RYPNE

UNDERWOOD JEWELERS CORP.

BIRMINGHAM AL 35203		BIRMINGHAM AL 35203				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		' [Applied For	
21		26				59-1632534			Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		,	Additional	
27						3. Certicate of Status Desired		Fee I	Required	
City & State	3	City & State				6. Election Campaign Financing		\$5.0	O May Be	
13		28				Trust Fund Contribution		Adde	d to Fees	
Zip	Country Zip		Co	untry		8. This corporation owes the cur	rent year Inta	ıngible		
24	25	29	30			Personal Property Tax.		Yes	□No	
ــــــــــــــــــــــــــــــــــــــ	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New	Registered A	Agent		
				81	Name	٠ -				
BYRNE, PAUL M.				82	Stroot Addr	ess (P.O. Box Number is Not Accept	table)			
2044	SAN MARCO BLVD.		62 Street Add			ess (F.O. Box Humber is Not Accep-	(abia)			
JACI	KSONVILLE FL 32207			83						
				84	City		FL	85 Zi	p Code	
44	to the provisions of Sections 607.050	2 and 507 1509 Florida Statu	tes the	ahove	-named com	oration submits this statement for the	e nurnose of	Lt_ changing	its registered	
office or s	naistered agent or both in the State	of Florida, Such change was	ลมโทดกร	ed by	the corporation	on's board of directors. I hereby acce	ept the appoir	itment as	registered	
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fi	orida Sta	atutes	-		1.1/0	_		
SIGNATURE	, · -v	me_				2/	16/7	7		
				gistered Agent signature require		ADDITIONS/CHANGES TO O	FEICERS AN	D DIREC	TORS IN 12	
12.		☐ DELETE		TITLE	70		11102,101.41	Chang		
TITLE	STD	LJ DELETE		NAME		rector		~~~		
NAME	BROMBERG, FRANK H JR		1							
STREET ADDRESS	123 N 20TH STREET		1		ADDRESS					
CITY-ST-ZIP	BIRMINGHAM, AL 00000		_	CITY-S	T-ZIP			[] Chang	e	
TITLE	V	☐ DELETE		TITLE				☐ Glany	e [] Addition	
NAME	HAMILTON, JAMES D.			NAMÉ						
STREET ADDRESS	229 HOGAN ST		2.3	STREE1	ADDRESS					
CITY-ST-ZIP	JACKSONVILLE, FL 00000		2.4	CITY-S	ST-ZIP					
TITLE	CD	☐ DELETE	3.1	TITLE				Chang	e Addition	
NAME	BYRNE, PAUL M		3.2	NAME						
STREET ADDRESS	123 N 20TH STREET		3.3	STREET	ADDRESS					
CITY-ST-ZIP	BIRMINGHAM, AL 00000		3.4	CITY-S	T-ZIP					
TITLE	D	☐ DELETE	- 4.1	TITLE				☐ Chang	e Addition	
NAME	BROMBERG, EUGENE A		4.2	NAME						
STREET ADDRESS	123 N 20TH STREET		4.3	STREET	T ADDRESS		:.			
CITY-ST-ZIP	BIRMINGHAM, AL 00000		4,4	CITY-S	T-ZIP					
TITLE	P	☐ DELETE	5.1	TITLE				Chang	e 🔲 Addition	
NAME	BROMBERG, C CLAYTON		5.2	NAME		<u>-</u>		/ -		
STREET ADDRESS	229 HOGAN ST		5.3	STREET	TADDRESS 3	.DHY San Moreo 1	८।४८			
CITY-ST-ZIP	JACKSONVILLE, FL 00000		5.4	CITY-S		acksonville, FZ	3226	57		
TITLE	UNDINOCITALETT I F 00000	☐ DELETE		TITLE		cretary - Treasurer	<u> </u>	Chang	e Addition	
			6.2	NAME	- F	ederick W. Bromh.	era			
NAME			1				4			
STREET ADDRESS				CITY-S		Birmingham	Az_	35	203	
CITY-ST-ZIP			0.4	JII 1-3		siming your.	I 1 (<u> </u>	

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

FILED

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90100 046 ***150.00