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Apr 22 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 510658 (8)

1. Corporation Name  
FABULOUS DIAMONDS OF HIALEAH, INC.

Principal Place of Business  
589 WEST 49TH ST.  
HIALEAH FL 33012

Mailing Address  
655 N.W. 57TH AVENUE  
MIAMI FL 33126-4814  
US



3. Date Incorporated or Qualified 08/16/1976  
3a. Date of Last Report 03/22/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-1683866		Applied For	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22. City & State		27. City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
23. Zip		28. Country		29. Zip		30. Country	
24. Zip		25. Country		29. Zip		30. Country	

9. Name and Address of Current Registered Agent

TARGAC, GLENN  
655 N.W. 57TH AVE  
MIAMI FL 33126

10. Name and Address of New Registered Agent

81. Name SIMON FERRO  
82. Street Address (P.O. Box Number is Not Acceptable) 655 N.W. 57th Avenue  
83.  
84. City Miami FL 85. Zip Code 33126

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, 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 SIMON FERRO DATE March 28, 1997

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	R	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TARGAC, GLENN	1.2 NAME	
STREET ADDRESS	655 N.W. 57TH AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126	1.4 CITY-ST-ZIP	
TITLE	D/S/T	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORALES, ELOISA FERRO	2.2 NAME	
STREET ADDRESS	655 N.W. 57TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126	2.4 CITY-ST-ZIP	
TITLE	D/P	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRO, SIMON	3.2 NAME	
STREET ADDRESS	655 N.W. 57TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRO, SIMON	4.2 NAME	
STREET ADDRESS	655 N.W. 57TH AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRO, ANGEL M.	5.2 NAME	
STREET ADDRESS	655 N.W. 57TH AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRO, SIXTO	6.2 NAME	
STREET ADDRESS	655 N.W. 57th Avenue	6.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, Florida 33126	6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 28, 1997 (305) 264-2773

CR2E034 (9/96)