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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 640650

(8)

JEWELERS INTERNATIONAL SHOWCASE, INC.										
•										
Principal Plac	e of Business	Mailing Address					BIGH BIGH	THEN DIEN BUT	iil Bibil IADI	
6405 CONGRE	SS AVE	6405 CONGRESS AVE								
BUITE #125 BOCA RATON	FI \$3487-2844	SUITE #125 BOCA RATON FL 33487-2827 *								
US	12 9000 2007	US				3. Date Incorporated or Qualified	3a. Da	ate of Last	Report	
		*PLEASE CORRECT ZIP CODE				יוטוןטבןטוט	03/	18/1996	ı	
<del></del> -	lace of Business	2a. Mailing Address				4. FEI Number		1	Applied For	
Sulte, Apt.	# Ato	Suite, Apt. #, etc.				59-1949278		····	Not Applicable	
22	w, 6to.	27				5. Certificate of Status Desired	ΚX		Additional Required	
City & State	e	City & State			6. Election Campaign Financing		<del></del>	May Be		
23	·	28			Trust Fund Contribution			d to Fees		
Zip	Country	Zip * Country			8. This corporation has liability for intangible tax under s. 199.032,					
24	25	29 33487-2844 30			Florida Statutes Yes No					
<b>A</b>	9, Name and Address of Current	Hegistered Agent		81	Name	10. Name and Address of New Re	gistered	Agent		
CHABROW, PENN B, ESQ C/O WAMPLER, BUCHANAN, & BREEN,P.A. 777 BRICKELL AVENUE SUITE 900					Ivarre	ne				
					Street Addr	dress (P.O. Box Number is Not Acceptable)				
	MI FL 33131		63							
WHA	mi rt 93131									
				84	City		FL	85 Zip	Code	
11. Pursuant ( office or re agent. Lai	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	and 607.1508, Florida Statu f Florida: Such change was ions of, Section 607.0505, F	ites, the at authorized lorida Stati	oove by utes	e-named corp the corporati	oration submits this statement for the p ion's board of directors. I hereby accep	uroose of	changing ointment a	its registered s registered	
SIGNATURE										
	Signature, typed or printed name of registered agent			Age	on: signature require	ed when reinstating)	DATE.			
12.	OFFICERS AND PD	DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO Change		
NAME	BRESLOW, MICHAEL G.	bitch	1.2 NA					□ crange	L'1 Yournin	
STREET ADDRESS	6711 NEWPORT LAKE CIRCLE			13 STREET ADDRESS						
CITY-ST-ZIP	BOCA RATON FL		1.4 C(T			33496-3004 (ZIP CODE)	ì			
TITLE	STD	☐ DELETE	2.1 707	LE				Change	☐ Addition	
NAME	Kaplan, Frank L		2.2 NA	ME						
STREET ADDRESS	14000 SW 99TH COURT		2.3 ST	REET	ADDRESS	0017( /878 0088)				
CITY-ST-ZIP	MIAMI FL	55,576	2. 4 CI		S1 - ZIP	33176 (ZIP CODE)		<del></del>		
TITLE				3.1 TITLE					L.J Addition	
NAME STREET ADDRESS			3.2 NAI		*DDDECC					
CITY-ST-ZIP			3.3 SH 3.4. CH		ADDRESS					
TITLE		DELETE	4.1 1IT		51 - 41r		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	
NAME		<del></del>	4.2 NA		1				- 100111011	
STREET ADDRESS			4.3 STF	REET	ADDRESS					
CITY-ST-ZIP			4.4 CIT	Y-\$1	T- <b>Z</b> IP					
TITLE		☐ DELETE	5.1 1(1)	LE.				Change	Addition	
NAME			5.2 NA	ΜÉ						
STREET ADDRESS			- 1		ADDRESS					
CITY-ST-ZIP	, 1848	DELETE	5.4 CITY-S		I - ZIP			C*	- Adams	
TITLE				TITLE				Change	Addition	
NAME STREET ADDRESS			6.2 NAI		4DDBECC					
CITY-ST-ZIP					ADDRESS					
14. I do hereb	y certify that the information supplied	with this filing does not qual	6.4 CIT ify for the 6	хөг	mption stated	in Section 119.07(3)(i), Florida Statutes	. I further	certify that	t the	
Information	h Indicated on this annual report or suc	oplemental annual report is ne receiver or trustee empor	frue and ac wered to ex	CCU	rate and that i	my signature shall have the same legal as required by Chapter 607, Florida St	effect as atutes; ar	if made un nd that my	nder oath: that l	

MICHAEL G. BRESLOW, CEM-PRESIDENT