

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 640650

FILED
Jan 09, 2009
Secretary of State

Entity Name: JEWELERS INTERNATIONAL SHOWCASE, INC.

Current Principal Place of Business:

6421 CONGRESS AVE
SUITE #105
BOCA RATON, FL 334872858 US

New Principal Place of Business:

Current Mailing Address:

6421 CONGRESS AVENUE
SUITE #105
BOCA RATON, FL 334872858 US

New Mailing Address:

6421 CONGRESS AVE
SUITE #105
BOCA RATON, FL 334872858 US

FEI Number: 59-1949278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPCO, INC.
2699 S. BAYSHORE DRIVE
7TH FLOOR
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BRESLOW, MICHAEL G
Address: 7427 SEDONA WAY
City-St-Zip: DELRAY BEACH, FL 33446

Title: DST () Delete
Name: KAPLAN, FRANK L
Address: 14000 SW 99TH COURT
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: MANDELL, BRAD
Address: 1069 SCHERER WAY
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: SWIMMER, LENNY
Address: 2212 GLENBROOK
City-St-Zip: LAS VEGAS, NV 89117

Title: D () Delete
Name: SPIEGELMAN, ROBERT
Address: 673 DESTACADA AVENUE
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL G. BRESLOW

DP

01/09/2009

Electronic Signature of Signing Officer or Director

_____ Date