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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(1)

PITTMAN JEWELERS OF PARK PROMENADE, INC.

Principal Place of Business Mailing Address									ı idelinə ilai dilis bilib idibi iləbi Bı	H WISH BIRTH W	inth minth mil	#II #1EII ##I	
7357 W COLONIAL 7357 W COLON						NAL .							
ORLANDO FL 32618-008				ORLANDO FL 32818-008						DO NOT WRITE	INI THIC CO.	∆CE	
US				US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
										12/29/1981			
2. Principal P	lace of Busi	ness	20	. Mailing Ad	dress					4. FEI Number		IAI	pplied For
21			 -	26						59-2153263			ot Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.									Additional
22				7						5. Certificate of Status Desired		Fee Re	equired
City & State				City & State						6. Election Campaign Financing		\$5.00	May Be
23				28						Trust Fund Contribution			to Fees
Zip	Zip Country			Zip Cou			nlry	er mile corporation or		8. This corporation owes or has pair			_ ·
24	25 9. Name and Address of Current			ļ . <u> </u>	[30]					Personal Property Tax due June			_] No
	stered Ager)t	81 Name				10. Name and Address of New Reg	jistereo Ag	ent				
PITTMAN, LEROY							Name						
7357 W COLONIAL							82	Stre	et Addre	ss (P.O. Box Number is Not Acceptabl	e)		
ORLANDO FL 32818							83						
							3						
							84	City			FL	85 Zip	Code
11 Pigguant	to the provis	sions of Sections f	07 0502 and	607 1508 FI	orida Statuta	s the a		e-nam	ed corpo	oration submits this statement for the pu		nanging i	its registered
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, or 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE													
	Signature types	d or printed name of regi			(NOTE		d Age	eni s-gna	ure required	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DECTOR	DC IN 12
12. TITLE	Ρ	OFFICE	RS AND DIRE		DELETE	13. 1.1 H	TI E			ADDITIONS/CHANGES TO OFFICE		Change	Addition
	•	N, LEROY		ليبينا	DELETE	1.2 N					<u>-</u>	1 01141180	
NAME Street adoress		V COLONIAL						ADDRES	,				
		IDO FL							'				
CITY-ST-ZIP TITLE	ST	IDO I L		-	DELETE	2170		1-21P	+		<u> </u>	Change	Addition
NAME		AN, VIVIAN		_		22 N					_		
STREET ADDRESS		V COLONIAL					2 3 STREET ADDRESS		s				
CITY-ST-ZIP		IDO FL						ST-ZIP	Ĭ				
TITLE		····			DELETE	3 1 TI						Change	Addition
NAME						3 2 N	AME						
STREET ADDRESS						335	AEET	ADDRES	s				
CITY+ST-ZIP						3 4. C	ITY-S	ST - ZIP					
TITLE	·				DELETE	4111						Change	☐ Addition
NAME						4 2 N	AME						
STREET ADDRESS						4.3 S	HEET	ADDRES	s				
CITY-ST-ZIP						4.4 C	1Y-S	¥-ZIP					
TITLE					DELETE	51 T	TLE					Change	Addition
NAME						5.2 N	AME						,
STREET ADDRESS						53 S	REET	ADDRES	s				
CITY-ST-ZIP					.	540	IY-S	I - ZIP					
TITLE					DELETE	61 TI	TLE] Change	☐ Addition
NAME						6.2 N	AME						
STREET ADDRESS						6.3 \$	REET	ADDRES	s				

14. I 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 of 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 changet for on an attachment with an address.

FILED

Apr 20 1998 8:00am

Secretary of State

D HOOKAAD OKAAL AKKKA OOKAA HAKAN OOLAAL AKKA OOLAK ALAKK ALAKK DIAKA ALAKA ALAKA ALAKA