## 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 # F71706

A LONDON JEWELRY, INC.

(8)

**FILED** 

Apr 28 1997 8:00am

Secretary of State

Principal Plac	e of Business	Mailing Address				r is nifer erer 1900 i tibli enner saufa Arit nerer beter bibli ares sedir britt ern.				
SS N.E. 1 STREET SUITE 10 MIAMI FL 83132-2426		55 N.E. 1 STREET								
		SUITE 16 MIAMI FL 33132-2428								
US	2-2420	MIAMI FL 33132-2420 US				2 Date Isosoppulari or Chaliford	T 0 - 0 -	to of Look	L Deney	
00		00				3. Date Incorporated or Qualified 03/02/1982	3a. 03/1	ite of Last <b> 5/1996</b>	i i	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21		26				59-2163375 Not Applicable				
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional	
22		27				S. Commone of blade treamed		Fee	Required	
City & Stat	е	City & State				6. Election Campaign Financing	\$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Cou	ntry		This corporation has liability for it			rs. 199.032,	
24	25	[29]	30					_] No		
	g, Name and Address of Curre	nt Registered Agent	{			10. Name and Address of New Reg	istered /	igent	· · · · · · · · · · · · · · · · · · ·	
	ra, mercedes		ĺ	B1	Name					
65 N.E. 1 STREET					Street Addr	et Address (P.O. Box Number is Not Acceptable)				
	TE 16		į	82						
. Miaj	MI FL 33132		[	83						
			}	84	City			OE   3	Codo	
				04	City		FL	85   Zij	p Code	
SIGNATURE	m familiar with, and accopt the oblig					red wher remalating)	DA1L			
12,	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	ORS IN 12	
TITLE	D	DELETE	1.1 10	ll <del>t</del>				Change	e 🔲 Addition	
NAME	PARA, MERCEDES		1.2 NA	ME						
STREET ADDRESS	55 N/W/ 1ST STREET #16		1380	HEET A	AUDRESS					
CITY-ST-ZIP	MIAMI FL		1.4 CIT	TY-\$1	1 - 716					
TITLE		DELETE	21 111	lLF		, and a second s		☐ Change	e Addition	
NAME			2.2 NA	M!						
STREET ADDRESS			23.810	KEE1.	ADDRESS					
CITY-ST-ZIP			2. 4 CI		ľ					
TITLE		DELETE	3 1 117					☐ Change	e Addition	
NAME			3.2 NA	ME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			3.4 CI		j j					
TITLE		313110	4.1 Til					Change	e Addition	
NAME .		<del></del>	4. 2 M		-			_ 0	_	
STREET ADDRESS					ADDRESS					
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NAME			5.2 NA							
					40/00/ce					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP	<u> </u>	☐ DELETE	5.4 011		·· ZII'			Change	e Addition	
TITLE		լ խա	6110		ļ			— ∩ mange	» L Naumon	
NAME			6.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			64 OH	TY - \$1	I - ZIP					

I do hereby certify that the information supplied with this filling 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 to use and accurate and that my signature shall have the same logal 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.