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FILED

Mar 11 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 # F96000000775 (4)

1. Corporation Name

BIJOUX INTERNATIONAL CORPORATION



Principal Place of Business  
505-A N.E. 3RD STREET  
DELRAY BEACH FL 33483

Mailing Address  
505-A N.E. 3RD STREET  
DELRAY BEACH FL 33483-5501

3. Date Incorporated or Qualified  
02/15/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

65-0635669

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME ORNSTEIN, IRVING  
STREET ADDRESS 154 HARBOR LAKE CIRCLE  
CITY- ST- ZIP WEST PALM BEACH FL 33413

☒ DELETE

TITLE VDST  
NAME HYUGA, TETSUYA  
STREET ADDRESS 1600 NORTH OAK STREET  
CITY- ST- ZIP ARLINGTON VA 22209

☐ DELETE

TITLE D  
NAME HYUGA, NAOKI  
STREET ADDRESS 6-30, WAKAMATSU-CHO, KOFU, YAMANASHI  
CITY- ST- ZIP JAPAN

☐ DELETE

TITLE CEO  
NAME HYUGA, JUNKO  
STREET ADDRESS 6-30, WAKAMATSU-CHO, KOFU, YAMANASHI  
CITY- ST- ZIP JAPAN

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

☐ DELETE

1.1 TITLE PRESIDENT  
1.2 NAME TETSUYA HYUGA  
1.3 STREET ADDRESS 1600 NORTH OAK STREET  
1.4 CITY- ST- ZIP ARLINGTON, VA 22209

☒ Change ☒ Addition

2.1 TITLE VICE-PRESIDENT  
2.2 NAME EDWARD LOPES  
2.3 STREET ADDRESS 2135-I SPRING HARBOR DRIVE  
2.4 CITY- ST- ZIP DELRAY BEACH, FL 33445

☒ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

☐ Change ☐ Addition

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

3-6-97

Date

561-266-0005

Daytime Phone #

CR2E034 (9/96)