

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G50449

(9)

1. Corporation Name

TOMAS MONTALVO JEWELRY, INC.

Principal Place of Business

117 N.E. 1ST AVE.
14TH FL. RM 1416
MIAMI FL 33132

Mailing Address

117 N.E. 1ST AVE.
14TH FL. RM 1416
MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/15/1983

3a. Date of Last Report

02/15/1994

2. Principal Place of Business

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2a. Mailing Address

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4. FEI Number

59-2302765

Applied For

Not Applicable

Suite Apt. #, etc.

Suite Apt. #, etc.

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

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**\$5.00 May Be
Added to Fees**

ZIP

Country

ZIP

Country

8. This corporation has liability for intangible tax under 5, 15a, 15b,
Florida Statutes. ☐ Yes ☒ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHEER, EMERY B., C.P.A., PA
12515 N. KENDALL DRIVE
SUITE #302
MIAMI FL 33183**

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 607.0802 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 of Registered Agent or Registered Agent in Charge)

(Signature of Secretary or Registered Agent in Charge)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

14

**P
MONTALVO, TOMAS
8621 SW 180TH STREET
MIAMI FL**

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1. NAME

1. STREET ADDRESS

1. CITY & STATE

☐ Change ☐ Addition

16

**ST
MONTALVO, YOLANDA
8621 SW 180TH STREET
MIAMI FL**

2. NAME

2. STREET ADDRESS

2. CITY & STATE

☐ Change ☐ Addition

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SIGNATURE:

Yolanda Montalvo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-95

305-460 2708