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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

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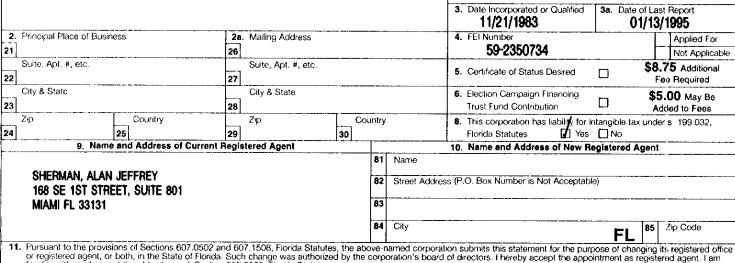
ERESH LOOK JEWELBY CO. INC.				
	EDECH	JEWIEL D	$\vee$ $\wedge \wedge$	ENIO.

168 SE 1ST STREET #801 MIAMI FL 33131

Principal Place of Business

Mailing Address

168 SE 1ST STREET #801 MIAMI FL 33131



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.

<del></del>	Signature, typed or printed name of registered agont and title i	<del></del>	NOTE Registered Agent signature			
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PTD	DELETE	1 1 TITLE	TREASURER	Change:	Addition
NAME	SHERMAN, ALAN JEFFREY		1.2 NAME	SHERMAN, HAN JEFFREY		
STREET ADDRESS	168 SE 1ST STREET 801		1.3 STREET ADDRESS	SHERMAN, ALAN TEFFREY.  168 SE 15+ STREET #801		
COY+\$1-2IP	MIAMI FL		1.4 CiTY+\$T-ZIP	MIAMI FL	_	
TITLE	8	□ DELETE	2 1 TITLE	PRESIDENT, VICE	Change	☐ Addition
NAME	SHERMAN, BRYAN		2.2 NAME	SHERMAN, BRYAN		
STREET ADDRESS	168 SE 1ST ST #801		2.3 STREET ADDRESS	168 SE 1" 57.#801		
CITY+ST-ZIP	MIAMI FL		2.4 City - St - ZiP	MIAMI FL  PAESIDENT, VICE SHERMAN, BRYAN 168 SE 15 STABOI MIAMI FL		
TITLE	V	DELE1E	3 1 TITLE		Change	Addition
NAME	SHERMAN, DEBORAH		3 2 NAME	SHERMAN, DESORAH		
STREET ADDRESS	168 SE 1ST STREET #801		3.3 STREET ADDRESS	SHERMAN, DESORAH 168 SE 14 ST#801		
CITY-ST-ZIP	MIAMI FL		3.4 CITY - ST - ZIP	MIAMI FL		
TITLE		DELETE	4. 1 TITLE		☐ Change	Add tion
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5 1 TITLE		☐ Change	Addition
NAME			52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST-ZIP			54 CITY-ST-ZIP			
TITLE		DELETE	6 1 TITLE		☐ Change	☐ Addition
NAME			62 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CiTY - ST - ZiP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 path; 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 abusinement with an address.

SIGNATURE:

305 3818494