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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90206 001 ***150.00

DOCU	MENT # G7087	1					
11 000 000		•					
FRESH	LOOK JEWELRY CO. INC.						
					<u>) </u>	HEALT STATE CLERK	
Principal Plac	ce of Business	Mailing Address					
•					,		
168 SE 1ST STREET #801 168 SE 1ST STREET #801 MIAMI FL 33131 MIAMI FL 33131						;	
	•	minimi 12 00101			DO NOT WRITE IN TH	IS SPACE	
				ſ	porated or Qualifed		
				11/21/19			
	Place of Business 2a. Mailing Address			4. FEI Number		<u> </u>	plied For
Suite, Apt	#, etc. Suite, Apt. #, etc.				734	\$8.75 A	t Applicable
22	27			5. Certifcate	of Status Desired	90./3 Fee Re	
City & Sta	te	City & State		6 Flection Ca	ampaign Financing	\$5.00	
23		28			Contribution	Added t	
Zip	Country	Zip	Country	8. This corpor	ration owes the current year le		
24	25 29 30			Personal Property Tax.			
	9. Name and Address of Curre	nt Registered Agent		10. Name and	Address of New Registered	d Agent	
out	DMAN DECODAL		81 Name	5 JEFF SH	FRHAN	,	. }
SHERMAN, DEBORAH				Address (P.O. Box Nui	mber is Not Acceptable)	7 77,	
168 SE 1ST STREET, SUITE 801 MIAMI FL 33131				168 SE	1 ST #801		
, INIM	WI FL 33131 .		83		,		ŀ
			84 City			85 Zip C	
44 D		007 4500 50-11- 00-11-	45	MIAMI	F		3141
office or a	to the provisions of Sections 607.050 registered agent, or both, in the State	of Florida. Such change was auth	norized by the corp	corporation submits the oration's board of direc	is statement for the purpose of itors. I hereby accept the appo	n changing its pintment as reg	registered gistered
agent. I a	m familiar with, and accept the obliga			- \-		a - 00	
SIGNATURE	Signature, types of printed name of registered age	TEFF SHERMA V	ICE PRESID	required when reinstating)	DATE	20-44	
12.	OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	T	★ DELETE	1.1 THLE			Change	Addition
NAME	STASEVICH, ALLEN		12 NAME				
STREET ADDRESS	168 SE 1ST STREET 801	•	1.3 STREET ADDRESS) . <i>,</i>		•	
CITY-ST-ZIP	MIAMI FL	·	14 CITY-ST-ZIP		·		
TITLE	VP	☐ DELETE	2.1 TTLE	P	\	Change	Addition (
NAME	SHERMAN, BRYAN		2.2 NAME	SHERMAN, BRY	gan Taron		Ì
STREET ADDRESS	100 00 101 01 2101	i	2.3 STREET ADDRESS	168 JE 1 5			~
CITY-ST-ZIP	MIAMI FL	(Departure)	2. 4 CITY-ST-ZIP	MIAMI, FL .	331 3 1		1156
TITLE	P	₽ DELETE	3.1 TITLE	SHERMAN, JE	F	Change	Addition
NAME	SHERMAN, DEBORAH		3.2 NAME	168 2E T 2	T#801		ĺ
STREET ADDRESS	,, <u></u>			168 20 7	22121		}
CITY-ST-ZIP TITLE	MIAMI FL	☐ DELETE	3.4. CITY-ST-ZIP	MIAMI , FL	1000	Change	Addition
NAME			4. 2 NAME	S,T SHERMAJ, BE 168 SE 1 S	e - A	□ ouguge	Day worker
STREET ADDRESS			4.3 STREET ADDRESS	JHEICHNO, VC	T#801		}
CITY-ST-ZIP		į	4.4 CITY-ST-ZIP	MIAMI, FL	33, 3,		}
TITLE	<u>. </u>	☐ DELETE	5.1 TITLE	· · (16 · · · () C		Change	☐ Addition
NAME.		,	5.2 NAME	· 	•		1
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP	_			<u> </u>
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME			•	İ
STREET ADDRESS			6.3 STREET ADDRESS			-	[
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

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 or suppliemental 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, with all other like empowered.

SIGNATURE: