FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FILED **PROFIT** Jan 15 1998 8:00am ELORIDA DEPARTMENT DE STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # RATICOFF DIAMOND COMPANY, INCORPORATED Principal Place of Business Mailing Address *** JERALD RATICOFF** % JERALD RATICOFF 3520 NORTH 28TH WAY HOLLYWOOD FL 33020 3520 NORTH 28TH WAY DO NOT WRITE IN THIS SPACE HOLLYWOOD FL 33020 3. Date Incorporated or Qualified 01/24/1984 4. FEI Number Mailing A Applied For 26 59-2368000 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 🔀 Yes Personal Property Tax due June 30 Name and Address of Current Registered 10. Name and Address of New Registered Agent Name RATICOFF, JERALD 3520 NORTH 28TH WAY 82 HOLLYWOOD 33020 83 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title it app soubte (NOTE (legistered Agent signal re ced when reinstatino) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Addition 1111116 **X** Change RATICOFF, JERALD NAME 1.2 NAME 3786 NE 209ND TERRACE STREET ADDRESS 1.3 STREET ADDRESS N.MIAMI BCH, FI Aventura, FL CITY-ST-ZIP 1.4 CHY-S1-7P DELETE Change TITLE 211811 Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 City-51-78 DELCTE TOLE 3.1 TOLE ☐ Change Add from NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY-ST-7IP DELETE TITLE Change 4.1.11114 ___ Addit-on NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - 7/P DETETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY+ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Ffurther 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 onth, 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 13 if changed, or on an attachingent with an address.

6 1 HILE

6.2 NAME

🔲 DELLETE

CIONATURE.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

De nort

Toral Ration

6.3 STREET ADDRESS

dalas

(305) 935-7278

Change

Addition