

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandria B. Murchom
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H05744 (8)**

1. Corporation Name
**R.P.B. JEWELRY, INC.
DBA RICHTERS OF PALM BEACH**



Principal Place of Business
**224 WORTH AVENUE
PALM BEACH FL 33480**

Mailing Address
**224 WORTH AVENUE
PALM BEACH FL 33480**

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/11/1984	3a. Date of Last Report 04/12/1995
21. State, Apt. #, etc.	26. State, Apt. #, etc.	4. FEI Number 59-2406652	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent KLEIN, STUART B SUITE 400B 1551 FORUM PLACE WEST PALM BCH FL 33401	10. Name and Address of New Registered Agent
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	85. Zip Code

11. Pursuant to the provisions of Sections 607.0522 and 607.1503, 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 _____ Date Registered Agent joins as registered agent _____ MAIL _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1. TITLE	Change Addition
PD	RICHTER, STEFAN B.	2. NAME	
STREET ADDRESS	224 WORTH AVE.	3. STREET ADDRESS	
CITY-STATE-ZIP	PALM BEACH FL	4. CITY-ST-ZIP	Change Addition
TITLE	SD	5. TITLE	Change Addition
NAME	RICHTER, DUDLEY	6. NAME	
STREET ADDRESS	4003 HILLSBORO RD.	7. STREET ADDRESS	
CITY-STATE-ZIP	NASHVILLE TN	8. CITY-ST-ZIP	Change Addition
TITLE	TD	9. TITLE	Change Addition
NAME	RICHTER, PHYLLIS A.	10. NAME	
STREET ADDRESS	224 WORTH AVE.	11. STREET ADDRESS	
CITY-STATE-ZIP	PALM BEACH FL	12. CITY-ST-ZIP	Change Addition
TITLE		13. TITLE	Change Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY-STATE-ZIP		16. CITY-ST-ZIP	Change Addition
TITLE		17. TITLE	Change Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY-STATE-ZIP		20. CITY-ST-ZIP	Change Addition

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 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: *Stefan Richter* 2/5/96 4076550274
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)