

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

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90258 029 ***150.00
03-01-1999 90258 030 *****8.75

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PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H31776

1. Corporation Name
SOUTHEASTERN JEWELRY CORPORATION

Principal Place of Business
4444 INVERRARY BLVD.
LAUDERHILL FL 33319

Mailing Address
4444 INVERRARY BLVD.
LAUDERHILL FL 33319



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/28/1984

4. FEI Number
59-2472774

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business
21 21218 ST. ANDREWS BLVD
Suite, Apt. #, etc.
22 SUITE 309
City & State
23 BOCA RATON FLA.
Zip
24 33433 Country
25 USA

2a. Mailing Address
26 21218 ST. ANDREWS BLVD
Suite, Apt. #, etc.
27 SUITE 309
City & State
28 BOCA RATON FLA
Zip
29 33433 Country
30 USA

9. Name and Address of Current Registered Agent
GOLDMAN, JEROME
4444 INVERRARY BLVD.
LAUDERHILL FL 33319

10. Name and Address of New Registered Agent
81 Name
GOLDMAN JEROME
82 Street Address (P.O. Box Number is Not Acceptable)
7337 ESTRELLA CT.
83
84 City
BOCA RATON FL 85 Zip Code
33433

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.

SIGNATURE Jerome Goldman PRES. JEROME GOLDMAN 1-30-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	PST
NAME	GOLDMAN, JEROME	1.2 NAME	GOLDMAN, JEROME
STREET ADDRESS	4444 INVERRARY BLVD.	1.3 STREET ADDRESS	7337 ESTRELLA CT
CITY-ST-ZIP	LAUDERHILL FL 33319	1.4 CITY-ST-ZIP	BOCA RATON, FLA. 33433
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
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 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, with all other like empowered.

SIGNATURE: Jerome Goldman PRESIDENT 1-30-99 561-906-3509
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)