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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Kathorine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90016 001 ***150.00

NAME	 Corporation 	VIEN I # J3280 IEWELRY, INC.	0					
NSSIMMEE FL 34744 SSIMMEE FL	Principal Place of Business Mailing Address					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
US Description of Business 2. Principal Place of Business 2. Adulting Address. 3. Date incorporated of Qualified O9/10/1986 4. FEB Number Adplicable Applicable Applica						,		
3. Sate necognizate of Cualified Og/10/1986 September Og/10/198						DO NOT WRITE IN T	IIS SPACE	
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28						6. Election Campaign Financing	\$5.00	May Be
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LAQUER, GLORY 2430 FULTON RD KISSIMMEE FL 34744 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City F*L 85 Zip Code 85 Zip Code 86 City F*L 85 Zip Code 86 Zip Code 87 Zip Code 88 Zip Code 89 Zip Code 89 Zip Code 89 Zip Code 89 Zip Code 80 Z		9. Name and Address of Cu	rrer t Registered Agent			10. Name and Address of New Register	ed Agent	
2430 FULTON RD KISSIMMEE FL 34744 11. Pursuant to the provisions of Sections 607.050 2 and 607.1508, Florida Stat ites, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the oppositionent as reyistered agent it an familiar with, and accept the obliga ions of, Section 607.050, Florida Stat ites, 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 oppositionent as reyistered 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 oppositionent as reyistered of the corporation's board of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the object of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of directors. I hereby accept the oppositionent as reyistered of dire				81	Name			j
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### City ### File 85 Zip Code 11. Pursuant to the provisions of Sections 607.050 2 and 807.1508, Florida Stati Ales, 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 be the corporation's board of directors. I hereby accept the appointment as registered office or registered agent and septiment of the provisions of Section 607.0505, Florida Statutes. **SIGNATURE** Signature, types or printed in time of inquired agent fand one of appointment as registered agent and one of appointment as a registered agent and one of appointment								
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CITY-S1-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.