1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J49469** 1. Corporation Name

PIERRO'S JEWELERS, INC.

Principal Place of Business	Mailing Address	
6749 MANATEE AVE W BRADENTON FL 34209 US	6749 MANATEE AVE W BRADENTON FL 34209 US	

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90086 021 ***150.00



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6749 MANATEE		6749 MANATEE AVE W BRADENTON FL 34209						
BRADENTON FL 34209 US US BRADENTON FL 34209 US				DO NOT WRITE I	N THIS SPACE			
	•				Date Incorporated or Qualifed			
					12/22/1986			تند
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	L A	pplied For	
21	•	26			59-2822563	X,	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75	Additional	
22		27			5. Certificate of Status Desired	Fee F	Required	
City & State	e	City & State			6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Cou	intry	8. This corporation owes the current	ear Intangible		
24	25	29	30		Personal Property Tax.	☐ Yes	□No	
- 	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regi	stered Agent		
				81 Name			į	
MAN	ison, John C.			82 Street	Address (P.O. Box Number is Not Acceptable)	 		
406	13TH ST WEST			02 30000	Address (F.O. Dox Marrison is Not Acceptable)			
BRA	DENTON FL 33505			83				
				<u> </u>		(a.a.) =:		
)				84 City		FL 85 Zip	Code	
11 Burniant	to the provisions of Sections 607 0502	and 607 1508 Florida Statute	s the a	bove-named	corporation submits this statement for the pur	ose of changing it	ts registered	
l office or r	edistered agent, or both, in the State o	i Fiorida. Such change was al	ıtnonzed	ov the corpo	oration's board of directors. I hereby accept the	e appointment as r	egistered	
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Flor	ida Stat	utes.				
SIGNATURE	Signature, typed or printed name of registered agent	-d file if and back (NOTE)	Panietora	Acont cionature r	equired when reinstating)	DATE		؍ ا
12.	Signature, typed or printed name or registered agent		13.	Agent signature (ADDITIONS/CHANGES TO OFFICE		ORS IN 12	ç
TITLE .	PD OF FIGURES AND	DELETE .	1.1 11	TI.E.	7.00111010701111020 10 21110	☐ Change		7
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NAME			1	TREET ADORESS				8
STREET ADDRESS								١
CITY-ST-ZIP	BRADENTON FL	☐ DELETE	_	TY-ST-ZIP		Change	Addition	{
TITLE	VTD	LJ DELETE	2.1 TI					=
NAME	PIERRO, RONALD C.		2.2 N		_			ļ
STREET ADDRESS	6749 MANATEE AVENUE WEST		2.3 S	TREET ADDRESS			•	
CITY-ST-ZIP	BRADENTON FL		_	ITY-ST-ZIP			- Addition	ł
TITLE	S	☐ DELETE	3.1 Ti	TLE		Change	e Addition	
NAME	ETHEL M. BROOKS		3.2 N	AME			:	Į
STREET ADDRESS	6749 MANATEE AVE., WEST							ĺ
1	01 10 10 00 00 00 00 00 00 00 00 00 00 0		3.3 S	TREET ADORESS				
CITY-ST-ZIP	BRADENTON FL			TREET ADORESS		 .		
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TITLE	BRADENTON FL	☐ DELETE	3.4. C 4.1 TI 4. 2 N	ITY-ST-ZIP TLE		[] Change	e ☐ Addition	
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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:

🔌 REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/99 Date

(941)792-2967

Daytime Phone #