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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J56908

TRADEMASTER JEWELERS, INC.

(3)

Mailing Address

908

## FILED Feb 03 1997 8:00am Secretary of State

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1700 INTERNATIONAL SPEEDWAY BLVD 140 DAYTONA BCH FL 32114 US		140	DAYTONA BCH FL 32114-1331			3. Date Incorporated or Qualified 02/10/1987	1	. Date of Last Report 05/01/1996	
2. Principal Place of Business 28.		2a. Mailing Address	a. Mailing Address			4. FEI Number		A	pplied For
21		26							lot Applicable
Suite, Apt #, etc.		27			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State 23		28	· • · · · · · · · · · · · · · · · · · ·		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Z(p)	Country 7.p 25 29			8. This corporation has liability for intangible Florida Statutes			Yes [	□ No	
	9. Name and Address of Cui	rrent Registered Agent		10. Name and Address of New Registered Agent				Agent	
BARRETT, MARTIN			8	81 Name					
1700 INTERNATIONAL SPEEDWAY BLVD 140 DAYTONA BCH FL 32114			8		Street Addr	ress (P.O. Box Number is Not Acceptable	e)		
			8	3					***
			8	4	City	- <del> </del>	FL	<b>85</b> Zip	Code
11. Pursuant office or r agent if a	to the provisions of Sections 607, egistered agent for both, in the S im familiar with, and accept the o	tate of Florida. Such change v <u>Siga</u> tions of, Section 607.0505	vas authorized l 5, Florida Statut	ve- oy 1	named corp the corporat	poration submits this statement for the pition's board of directors. I hereby accep	urpose of t the app	changing ointment a	its registered s registered
SIGNATURE		Mortin A. 1	Arroft				-21-5	7	
	Styndium, typical or printed name of registeres		(NOTE: Registered A	gent	t signature requir	<del>-</del>	DATE	5,555	50.01.10
12.	D	AND DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFFIC	EHS ANL	Change	Addition
NAM <del>!</del>	BARRETT, MARTIN	ניין מנוניונ						Change	LJ Addition
	205 SUMMERHAZE CT			1.2 NAME					
ODMOND DOLLE				1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE	Official Bolling	DELETE		******	Zir	······		Change	Addition
NAME		L., OCCC	2.2 NAMI					onange	L Addition
STREET ADDRESS			2.2 NAME		Donrec				
CITY- ST- ZIP			2.4 CITY						
71ft F		DELETE			- ZIF		<del>UN</del>	Change	Addition
NAME			3.2 NAMI				7		
STEET ADDRESS			3.3 \$TRE		INDRESS.				
CITY-ST-ZIP			3.4. CITY						
TITLE		DELETE		_	h."			Change	Addition
NAME		_	4. 2 NAM						
STREET ADDRESS			4.3 STRE		ADDRESS				
CITY-SF-ZIP			4.4 CITY-						
TITLE		DELETE			- E-1			Change	Addition
NAME			5.2 NAMI		ļ				
STREET ADDRESS			5.3 STRE		ADDRESS				
CITY-ST-ZIP			5.4 CITY						
TITLE		DELETE			- F1L			Change	Addition
NAME		the section	6.2 NAMI						
					IDDBEEC				
STREET ADDRESS			6.3 STRE	LI A	Innue22				

14. I do 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 it changed, or on an attachment with an address.

**SIGNATURE:** 

MARTINE AND TYPES OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

1-28-87 SOY 255-0786