


FILE NOW: FILING FEE IS ~~165.00~~ 165.00

FILED

May 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1503034 1. Corporation Name			
Principal Place of Business VERA'S EARRING DISPLAY INC. 4410 BOUGAINVILLE DRIVE LAUDERDALE BY THE SEA, FL 33308		Mailing Address	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country
9. Name and Address of Current Registered Agent HARRY RABINO 4410 BOUGAINVILLE DRIVE LAUDERDALE BY THE SEA, FL 33308		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		86	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE <i>Harry Rabino</i> DATE 5/5/97			
12. OFFICERS AND DIRECTORS			
TITLE	NAME	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PRES.	HARRY RABINO	1.1 TITLE	
4410 BOUGAINVILLE DRIVE	LAUDERDALE BY THE SEA, FL 33308	1.2 NAME	
4410 BOUGAINVILLE DRIVE	LAUDERDALE BY THE SEA, FL 33308	1.3 STREET ADDRESS	
4410 BOUGAINVILLE DRIVE	LAUDERDALE BY THE SEA, FL 33308	1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	
TITLE	NAME	2.2 NAME	
TITLE	NAME	2.3 STREET ADDRESS	
TITLE	NAME	2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	
TITLE	NAME	3.2 NAME	
TITLE	NAME	3.3 STREET ADDRESS	
TITLE	NAME	3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	
TITLE	NAME	4.2 NAME	
TITLE	NAME	4.3 STREET ADDRESS	
TITLE	NAME	4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	
TITLE	NAME	5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	
TITLE	NAME	5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	
TITLE	NAME	6.2 NAME	
TITLE	NAME	6.3 STREET ADDRESS	
TITLE	NAME	6.4 CITY-ST-ZIP	
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: <i>Harry Rabino</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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