FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name K17926

(2)

HAYNE	S JEWELERS, INC.				
Principal Place	of Business	Mailing Address	***		
907 10TH ST PALMETTO F	M. HATNES Danie I A. H E. L 34221	ay aes % Kenneth M. Hayn 907 10TH ST E. PALMETTO FL 34221	B Daniel A. A	3. Date Incorporated or Qualified 3a. Date of Last Repor	л
2. Principal Pla	ce of Business	2a. Mailing Address		03/07/1988 04/21/1995	
				4. FE Number Applie 65-0044228 Not A	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		, / ¢9.75	
2		27		5. Certificate of Status Desired Fee Requ	
City & State		City & State		6. Election Campaign Financing \$5.00 M	lay Be
3) Zip	Country	28	T	Trust Fund Contribution L.I Added to	
4	Country 25	Ζιρ 29	Country 30	 8. This corporation has liability for intangible tax under s 199 Florida Statutes Yes No 	1.032,
<u>:1</u>	9. Name and Address of Curre		[30]	10. Name and Address of New Registered Agent	
907 10TH PALMET	TO FL 34221		83 90	ress of O. Blox Number is Not Acceptable; 7	ode 22 /
11. Pursuant to	the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above named corporate to the	ration submits this statement for the purpose of changing its regist	tered offic
familiar with	and accept the obligations of, Sec	ora con locos, Fibrida Statales,			int Lam
SIGNATURE S			A Haznes I: Registered Agunt Whather require		
12.	OPTICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	
NAME	HAYNES, KENNETH M.] Addit on
STREET ADDRESS	907 10TH ST. E.		1.3 STREET ADDRESS 9	laynes, Daniel A.	
iTY - ST - ZiP	PALMETTO FL		1.4 CHY+SE-ZIP	Palmetto FL 34221-4131	
m:		☐ DELET€	2 1 TITLE		Addition
AME			2.2 NAME		
STREET ADDRESS			2.3 STHEET ADDRESS		
iTY-ST-ZiP			2.4 CITY - ST - ZIP		
4315		DEL ÉTE	3) TITLE	Change] Addition
IAME PRELI ADDRESS			3.2 NAME		
ITY-ST-ZIP			3.3 STREET ADDRESS		
11:15 - 21r		[] DELETE	3.4 C-1Y - S1 - ZIF 4. 1 T-TUE	[Change	Addit-on
AME		Д эссэн	4.2 NAME	change) Modit-bil
TREET ADDRESS			4.3 STREET AUDRESS		
1TY - S7 - 7IP			4.4 CHY-SI-701		
ITLE		DELETE	5 1 TITLE	Change 🔲	Addition
AME			5.2 NAME		
TREET ADDRESS			5 3 STREET ADDRESS		
- IY - ST - Z-F'			5.4 CITY - ST - ZIP		
TLE		DELETE	6 1 TIF; F	Change 🔲	Addition
AM:			6.2 NAME		
TREET ADDRESS			6.3 STREET ADDRESS		
CITY - \$1 - ZIP	codify that the information arms to a	with this floor is not man and a	64 CI Y-S1-ZIP		
oath; that I	ne information indicated on this ann	ual report or supplemental annu pration or the receiver or trustee	ial report is true and accura enipowered to execute thi	or the exemption stated in Section 119.07(3)(k), Florida Statutes. I tle and that my signature shall have the same legal effect as if mad is report as required by Chapter 607, Florida Statutes; and that my	12112401

ME OF SIGNING OFFICER OR DIRECTOR A Hayner 1-22-96 813-7297744