

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K29459 (0)

1. Corporation Name

MR. LUCKY JEWELRY, INC.



Principal Place of Business

Mailing Address

1909 34 ST N
ST PETERSBURG FL 33713

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ST PETERSBURG FL 33713

3. Date Incorporated or Qualified
07/26/1988

3a. Date of Last Report
05/01/1995

4. FEI Number

~~59-2984282~~ 59-3383762

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 7200 CENTRAL AVE

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 ST PETE FLORIDA

28 Zip

24 33707

Country

25 PINELLAS

29 Zip

Country

30

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BURTON, WILLIAM C.
1909 34 ST N
ST PETERSBURG FL 33713

Penelope B. Esposito
7/24/96

10. Name and Address of New Registered Agent

81 Name PENELope B. Esposito
82 Street Address (P.O. Box Number is Not Acceptable)
927 HSE AVE NE
83
84 City ST. PETERSBURG FL 85 Zip Code 33703

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Penelope B. Esposito

DATE

7/24/96

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DP	BURTON, WILLIAM C.	5500 38TH AVE	ST. PETERSBURG FL	<input checked="" type="checkbox"/>
V	BURTON, DARLENE	5500 38TH AVE	ST. PETERSBURG FL	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13.

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP
PSTD	PENELope B. Esposito	927 HSE AVE NE	ST PETERSBURG FL 33703																				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Penelope B. Esposito

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/96

DATE

813-345-1614

Daytime Phone #