

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 29 1997 8:00am
Secretary of State

DOCUMENT # K59249 (8)

1. Corporation Name
GOLDCRAFT JEWELERS, INC.

Principal Place of Business
6761 W INDIANTOWN RD
SUITE 28
JUPITER FL 33458

Mailing Address
6761 W INDIANTOWN RD
SUITE 28
JUPITER FL 33458-3989



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/18/1989		3a. Date of Last Report 02/01/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0088429		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ISOLICA, SANDRA 6761 W. INDIANTOWN ROAD SUITE 28 JUPITER FL 33458				b1 Name			
				b2 Street Address (P.O. Box Number is Not Acceptable)			
				b3			
				b4 City FL b5 Zip Code			

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

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP
	PVST	ISOLICA, SANDRA	13341 ST TROPEZ CIR				
			PALM BCH GRDNS FL				
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY-ST-ZIP
	D	ISOLICA, SANDRA	13341 ST TROPEZ CIR				
			PALM BCH GRDNS FL				
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	21. TITLE	22. NAME	23. STREET ADDRESS	24. 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE

[Signature]

1/22/97 TILMAN 5/2/97

CR2E034 (9/96)