FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K66144 (2)

1. Corporation Name
MICHAEL FINEST WORLD TREASURE JEWELRY, INC.

Principal Place of Business	Mailing Address
36 NE FIRST STREET SUITE 300 MIAMI FL 33132 US	C/O ROBERTSON AND COMPANY, P.A. 1100 PARK CENTRAL BLVD. S., SUITE 1700 POMPANO BCH. FL 33064 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/16/1989
3a. Date of Last Report: 03/02/1994
4. FEI Number: 65-0144184 — [ ] Applied For [ ] Not Applicable
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

2. Principal Place of Business: 21 ____ Suite, Apt. # etc.: 22 ____ City & State: 23 ____ Zip: 24 ____ Country: 25 ____
2a. Mailing Address: 26 ____ Suite, Apt. # etc.: 27 ____ City & State: 28 ____ Zip: 29 ____ Country: 30 ____

9. Name and Address of Current Registered Agent

~~SIDLOSCA, RANDALL L.
1101 BRICKELL AVE
STE 902
MIAMI FL 33131~~

10. Name and Address of New Registered Agent

81 Name: GUDRUN LEISSERING
82 Street Address (P.O. Box Number is Not Acceptable): 36 NE 1st. Street- Suite 300
83
84 City: MIAMI FL 85 Zip Code: 33132

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

SIGNATURE: G. Leissering 4-29-95

12. OFFICERS AND DIRECTORS

Title	PD
Name	LEISSERING, MANFRED M.
Street Address	1100 PARK CENTRAL BLVD.
City-St-Zip	POMPANO BCH. FL
Title	VD
Name	LEISSERING, GUDREN
Street Address	1100 PARK CENTRAL BLVD.
City-St-Zip	POMPANO BCH. FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] Change [ ] Addition (blank entries)

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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 on an attachment with an address.

SIGNATURE: G. Leissering — 4-29-95 — 305-3759440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: G. LEISSERING
DATE / DAYTIME PHONE

0107870 CP

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Division of Corporations

APPROVED AND FILED

57

SECRETARY OF STATE ... FLORIDA

DOCUMENT # K66880 (1)

1. Corporation Name

J.P. ACCOUNTING SERVICE, INC.

Principal Place of Business	Mailing Address
% JOSEPH PIELOCH 8437 FOREST HILLS DR G-307 CORAL SPRINGS FL 33065	% JOSEPH PIELOCH 8437 FOREST HILLS DR G-307 CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/20/1989
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21 / 2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / Suite, Apt. #, etc. — 27
City & State — 23 / City & State — 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 65-0104208 — Applied For / Not Applicable

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. The corporation has liability for intangible tax under S. 199.032 Florida Statutes. Yes / No

9. Name and Address of Current Registered Agent

PIELOCH, JOSEPH
8437 FOREST HILLS DRIVE
G-307
CORAL SPRINGS FL FL 33065

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT	1 TITLE	Change / Addition
NAME	PIELOCH, JOSEPH	1 NAME	
STREET ADDRESS	8437 FOREST HILLS DRIVE G-307	1 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	1 CITY-ST-ZIP	
TITLE		2 TITLE	Change / Addition
NAME		2 NAME	
STREET ADDRESS		2 STREET ADDRESS	
CITY-ST-ZIP		2 CITY-ST-ZIP	
TITLE		3 TITLE	Change / Addition
NAME		3 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		3 CITY-ST-ZIP	
TITLE		4 TITLE	Change / Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	Change / Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	Change / Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

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)(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 on an attachment with an address.

SIGNATURE: Joseph Pieloch Joseph Pieloch Dir 5-1-95 305 345-0056
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

0110206 CP