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May 22 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **L04098** (4)  
1. Corporation Name  
**THE INTERNATIONAL COLECTION OF JEWELRY, INC.**



Principal Place of Business Mailing Address  
**1 NE 1ST ST.  
STORE 7 METRO MALL BLDG  
MIAMI FL 33132** **1 NE 1ST ST.  
STORE 7 METRO MALL BLDG  
MIAMI FL 33132-2433**

3. Date Incorporated or Qualified **07/21/1989** 3a. Date of Last Report **01/02/1997**  
4. FEI Number **65-0230121** 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 2a. Mailing Address  
21 Suite, Apt #, etc. 26 Suite, Apt #, etc.  
22 City & State 27 City & State  
23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

**RABBI, JOSEPH  
1 NE 1ST ST  
STORE 7, METRO MALL BLDG  
MIAMI FL 33132**

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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE ☐ DELETE  
NAME **PD RABBI, JOSEPH**  
STREET ADDRESS **1 NE 1ST ST, #7**  
CITY-ST-ZIP **MIAMI FL 33132**  
TITLE ☐ DELETE  
NAME **VD RABBI, LIZI**  
STREET ADDRESS **1 NE 1ST ST, #7**  
CITY-ST-ZIP **MIAMI FL 33132**  
TITLE ☐ DELETE  
NAME **STD RABBI, GRACE**  
STREET ADDRESS **1 NE 1ST ST, #7**  
CITY-ST-ZIP **MIAMI FL 33132**  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 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 Rabbi (president)** 4.24.97 (305) 371-6424  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0000007

CR2E034 (9/96)