**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE -

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L14944

1. Corporation Name

FANCY WATCH, INC.

## Mar 25, 1999 8:00 am **Secretary of State**

03-25-1999 90059 041 \*\*\*150.00



					<u>                                    </u>	/// E/E/) B/E// 8/8// E	(C)   61311   681
Principal Place	e of Business	Mailing Address					
8754 SW 8TH ST 8754 SW 8TH ST						1	
MIAMI FL 33174 MIAMI PL 33174							
,,					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					09/12/1989		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	plied For
27 21 SE Ist. Hue 26 21 SE Ist.				ve.	65-0151445	Not	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				-	a Cartifactor of Status Desired	\$8.75 Additional	
22 4th Floor 27 4th Floor					5. Certificate of Status Desired Fee Require		
City & Stat		City & State			6. Election Campaign Financing	\$5.00	May Be
23 Micinsi Handa 28 Mans FL					Trust Fund Contribution	Added to	o Fees
23 <b>V</b> V Zip	Country	Zip ~~ ~	* Countr	y	8: This corporation owes the current year	Intangible	
24 33	131 25 (1)54	29 33131	30 (	15 A	Personal Property Tax.		□No
24,	9. Name and Address of Curren			/	10. Name and Address of New Register	ed Agent	
	1		8	1 Name			
NASAJON, RICARDO 2625 COLLINS AVE #1808				(20.20.14.1.2.14.14.14.14.14.14.14.14.14.14.14.14.14.			
				82 Street Address (P.O. Box Number is Not Acceptable)			
l	MI BEACH FL 33140	•	8:	2			
i ivilizi	;	Ĩ	٥,	<b>'</b> \			
			8-	4 City		85 Zip C	ode
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the abo	ve-named corp	poration submits this statement for the purpose	of changing its	registered
) office or r	registered agent, or both, in the State of the familiar with, and accept the obligations.	of Florida. Such change was au	uthorized b	v tne comorati	ion's board of directors. I hereby accept the ap	pointment as reg	jistered
agent. La	im tamiliar with, and accept the obligat	ions of, Section 607.0505, Flor	iua Statute	5.			
SIGNATURE	Signature, typed or printed name of registered agen	t and title if anglicable (NOTE:	Registered Ap	ent signature requir	ed when reinstating) DATE	<del></del>	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PST DELETE		1,1 TITLE	1		☐ Change	Addition
NAME			1.2 NAME	1			
{	DOOR COLLING AND MACOO			ET ADDRESS			
STREET ADDRESS	•						
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY- 2.1 TITLE			Change	Addition
TITLE	[ <b></b>		I				
NAME			2.2 NAME	!			
STREET ADDRESS 2			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY	ST-ZIP			
	t	∏ nei ete	24 7777 E			□ Change	☐ Addition

6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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, with all other like empowered.

3.1 TITLE

3.2 NAME.

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

☐ Change

☐ Change

☐ Change

☐ Addition

☐ Addition

Addition