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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90019 029 ***150.00

DOCUMENT # **L72210** 1. Corporation Name

INTERNA	itional Jewelry Crea	Tions, Inc.								
Principal Place	e of Business	Mailing Address	-				3 INCIINIL ALE INUITA IIRIO IINOL SIO	ili ARII A1819 A1	OTE MENDE AT ME	Oldir Oldin (Bå)
FLEA WORLD % JESSE SCHWARTZ										
HWY 17-92 559 HARDWOOD PLACE										
SANFORD FL 32771 LAKE MARY FL 32746							DO NOT WRI	TE IN THIS	SPACE	
US US							B. Date Incorporated or Qualifed			
							05/09/1990			
Principal Place of Business 2a. Mailing Address							I, FEI Number			pplied For
21							<u>59-2917741</u>			lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certifcate of Status Desired			Additional
22		27							tequired	
City & Stat	e	City & State	City & State			- 6	6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution			to Fees
Z ₁ p	Country	Zip	Cour	ntry		8	3. This corporation owes the curr	ent year Inta		≥ No
24	25	<u></u>	30				Personal Property Tax.		Yes	AST I
	9. Name and Address of Cur	rent Registered Agent		04	N	10	Name and Address of New F	tegistered /	Agent	
CCH.	WADTZ IERRE			81	Name					
SCHWARTZ, JESSE E			ŀ	82	Street A	Address	dress (P.O. Box Number is Not Acceptable)			
	HARDWOOD PLACE		Į							
LAKI	E MARY FL 32746			83						1
			}	84	City				85 Zip	Code
		9502 and 607.1508, Florida Statute	1		•			FL		
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOTE:		Agent	l signature re	required whe	n reinstating)	DATE		
12.		AND DIRECTORS	13.			г	ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	D	☐ DELETE	1.1 TIT	LE	-				☐ Change	☐ Addition
NAME	SCHWARTZ, JESSE			1.2 NAME						1
STREET ADDRESS	559 HARDWOOD PL		1.3 ST	REET	ADDRESS			•		ì
CITY-ST-ZIP	LAKE MARY FL			1.4 CITY-ST-ZIP						
TITLE		☐ DELETE 2.1		2.1 TITLE					☐ Change	B ☐ Addition
NAME			2.2 NA	ME	}					
STREET ADDRESS			2.3 ST	REET	ADORESS					ĺ
CITY-ST-ZIP			2.4 Çî	TY-S	T-ZIP					
TITLE		☐ DELETE	3.1 TIT	ĽΕ					Change	Addition
NAME			3.2 NA	ME						
STREET ADDRESS			3.3 ST	REET	ADDRESS					
CITY-ST-ZIP			3.4. CI		T-ZIP					- Addis
TITLE		☐ DELETE	4,1 TIT						☐ Change	e
NAME			4, 2 NA	AME						}
STREET ADDRESS			4.3 ST	REET	ADDRESS					ļ
CITY-ST-ZIP			4.4 CI	Y-ST	-ZIP					
TITLE		☐ DELETE	5.1 TIT		Ì				Change	Addition
NAME			5.2 NA							ļ
STREET ADDRESS			5.3 ST	REET	ADDRESS					
CITY-ST-ZIP			5 4 C1		Γ-ZtP					
TITLE		☐ DELETE	6.1 TIT						Change	Addition
NAME			6.2 NA	_						
STREET ADDRESS			6.3 ST	REET	ADDRESS					
CITY-ST-ZIP	ĺ		6.4 CI	TY-\$1	r-ZIP	1				

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 of the feether 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 all achiment with an address, with all other like empowered.

SIGNATURE:

JESSE SCHWARTZ TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR