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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation EL ZA	MENT # L89309 FIRO JEWELRY, INC.	9 (3)					
Principal Place (of Business	Mailing Address					
6859 W 4TH		6859 W 4TH AVE.	C/O CASH GALORE. INC. 6859 W 4TH AVE. HIALEAH FL 33014				
HIALEAH FL US	33019	US	•		 Date Incorporated or Qualified 07/26/1990 	3a. Date of La	ast Report 1/1995
2. Principal Pia	ce of Business	2a, Mailing Address			4. FEI Number	1 00/0	Applied For
		26			65-0208443		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7 7 7	3.75 Additional Fee Required
City & State		Orty & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be
$Z\psi$	Country 25	Ζφ	30 Cou	untry	8. This corporation has liability for it Florida Statutes	ntangible tax unc	
1	g. Name and Address of Current			T	10. Name and Address of New Re		t
	- 			81 Name		<u> </u>	
DERRIN	IGER, TERRY A			B2 Street Addr	ress (P.O. Box Number is Not Acceptable	e)	
	ISH GALORE INC.		52 Street Add		1855 (1.0. Dox Hambor to Hor Pocopidolo)		
6859 W	/. 4TH AVE.			63			
HIALEA	H FL 33014			84 City		— 85	Zip Code
					ration submits this statement for the pur rd of directors. I hereby accept the appo	FL I	İ
		in 607.0505, Florida Statul	tes.			-	•
ignature	elynature spied or printed hance of registered agent at OFFICERS AND	nd little if applicable	tes.	d Agent sonature require		DATE	
SIGNATURE	OFFICERS AND PDS	nd little if applicable	(NOTE Registered	d Agent agnature recurre	ad when revistating)	DATE	ECTORS IN 12
SIGNATURE	OFFICERS AND PDS DERRINGER, TERRY A	nd little d'applicable DIRECTORS	(NOTE Registered 13. 1.11	d Agent signature require	ad when revistating)	DATE CERS AND DIRE	ECTORS IN 12
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centry that the information monored on this embouring supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under out; that I am an officer or director of the corporation or the receiver or trube empowered to execute this report as required by Chapter 607, Fiorida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _

3/9/96 305-822-9762