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FILED
Jun 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandray S. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M05091

(7)

1. Corporation Name

A.D.D. JEWELRY CORP.

Principal Place of Business

85 S.E. 2 AVE.
MIAMI FL 33137

Mailing Address

85 S.E. 2 AVE.
MIAMI FL 33137-1500



3. Date Incorporated or Qualified
09/12/1984

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 2742 BISCAYNE BLVD

Suite, Apt. #, etc.

22 City & State
MIAMI FL

23 Zip
33137

24 Country
USA

2a. Mailing Address

26 2742 BISCAYNE BLVD

Suite, Apt. #, etc.

27 City & State
MIAMI FL

28 Zip
33137

29 Country
USA

4. FEI Number

59-2475088

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

9. Name and Address of Current Registered Agent

MOSCOVICH, GUSTAVO
202 NE 212 TERR
NORTH MIAMI BEACH FL 33178

10. Name and Address of New Registered Agent

81 Name
LERNER ROBERTO
82 Street Address (P.O. Box Number is Not Acceptable)
9341 COLLINS AVE #301
83
84 City
SURFSIDE FL 85 Zip Code
33154

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | DELETE |
|-------|--------------------|-----------------|------------------|-------------------------------------|
| DP | MOSCOVICH, GUSTAVO | 202 NE 212 TERR | N MIAMI BEACH FL | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| TITLE | NAME | STREET ADDRESS | CITY - ST - ZIP | Change | Addition |
|-------|----------------|-----------------------|-------------------|--------------------------|-------------------------------------|
| DP | LERNER ROBERTO | 9341 COLLINS AVE #301 | SURFSIDE FL 33154 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

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: LERNER ROBERTO DATE: 6/28/97 (205) 577 1140

CR2E034 (9/96)