FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

(1)

DOCUMENT #

1. Corporation Name FREDDY'S DIAMOND AND FINE JEWELRY, INC.

PREDDI'S DIAMOND AND TIME SETTEMI, INC.									
Principal Place of Business Mailing Address									
12801 W. SUNRISE BLVD. 12801 W. SUNRISE BLVD. STE. 455 STE. 455 SUNRISE FL 33322 SUNRISE FL 33322					İ				
						<u> </u>			
US		US			01/02/1987		Date of Last Report 05/01/1995		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number 59-272	6922	↓	Applied For Not Applicable	
Suite, Apt. 4	#, etc.	Suite, Apt. #, etc.			5. Certificate of	Status Desired	1 1	5 Additional Required	
City & State)	City & State				npaign Financing	4	0 May Be	
:3		28	Cou	ntn /	Trust Fund C		ntangible tax under s	ed to Fees 199 032	
Zip T	Country 25	Zip 29	30	inty	Florida Statu			. 10010021	
24	9. Name and Address of Curren				10. Name and	Address of New R	egistered Agent		
	<u> </u>			81 Name					
STRAUSS, FREDERICK				82 Street Address (P.O. Box Number is Not Acceptable)					
	EDDY'S-SEYBOLD BLDG. St st #131 seybold arcade	:		83					
MIAMI F		•					1051	Zip Code	
MUNNIF	E 00102			84 City			FL 85 2	.ip Code	
11. Pursuant or register familiar wi	to the provisions of Sections 607.0502 red agent, or both, in the State of Floric th, and accept the commons of, Sect	and 607.1508, Florida Statu da. Such change was authori ion 607.0505, Florida Statute	ites, the abo zed by the o is.	ve-named co corporation's	orporation submits this s board of directors. I her	tatement for the pur eby accept the appo	pose of changing its ointment as registere	registered office id agent. I am	
SIGNATURE	topo posel	and title if applicable.	OTF: Registerer	Agent signature i	required when reinstatings		DATE		
12.	Signarure, typed or printed na		13.			CHANGES TO OFF	ICERS AND DIRECT		
THLE	D	☐ DELETE	1.11	ITLE			Change	e 🔲 Addition	
NAME	STRAUSS, FREDERICK L		1.2 N	ame					
STREE1 ADORESS	3701 NE 208 ST.			TREET ADDRESS					
CITY-ST-ZIP	N MIAMI BCH FL	[] DELETE	2 11	HTY-ST-ZIP			[7] Change	Addition	
TITLE			2.2 N						
NAME STREET ADDRESS				TREET ADDRESS					
CITY-ST-ZIP				ITY-ST-ZIP					
TITLE		☐ DELETE	3 1				Change	e 🔲 Addition	
NAME			3.2 M	IAME					
STREET ADDRESS			3.3	STREET ADDRESS	;				
CITY - ST - ZIP				CITY - ST - ZIP			Change	e 🔲 Addition	
TITLE		☐ DELETE		TITLE				, [] ,,,,,,,,	
NAME				name Street address				•	
STREET ADDRESS				STHEET ALRUHESS STY-ST-ZIP					
CITY-ST-ZIP		☐ DELETE		7(11-31-21) TITLE			Chang	e 🔲 Addition	
TITLE				NAME					
NAME STREET ADDRESS				STREET ADDRESS					
CITY-S1-ZIP				CITY-ST-ZIP					
TITLE		DELETE		TITLE			Chang	e Addition	
NAME			6.2	NAME					
STREET ADDRESS			6.3	STREET ADDRESS	5			•	
CITY-ST-ZIP			6.4	CITY-ST-ZIP	will for the everytion s		0.07(0)(1) 51: 13: 0:	16.46	

14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF S