


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

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P21926
1. Corporation Name
Finlay Fine Jewelry Corporation

Principal Place of Business Mailing Address
529 Fifth Avenue New York, NY 10017 529 Fifth Avenue New York, NY 10017

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/1/88	3a. Date of Last Report 4/18/97
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-3287757	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
National Corporate Research Ltd. Inc.
1406 Hays Street, Suite #2
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0602 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) (DATE) Registered Agent signature required when remaining DA: _____

12. OFFICERS AND DIRECTORS

TITLE	VT	<input type="checkbox"/> DELETE
NAME	Zurlnick, Bruce	
STREET ADDRESS	529 Fifth Avenue, 5th Fl.	
CITY- ST- ZIP	New York, NY 10017	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	Reiner, Arthur E.	
STREET ADDRESS	521 Fifth Avenue, 4th Fl.	
CITY- ST- ZIP	New York, NY 10175	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Cornstein, David B.	
STREET ADDRESS	529 Fifth Avenue, 6th Fl.	
CITY- ST- ZIP	New York, NY 10017	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Lee, Thomas H.	
STREET ADDRESS	590 Madison Avenue, 41st Fl.	
CITY- ST- ZIP	New York, NY 10022	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	Davis, Bonni	
STREET ADDRESS	529 Fifth Avenue, 6th Fl.	
CITY- ST- ZIP	New York, NY 10017	
TITLE	P	<input type="checkbox"/> DELETE
NAME	Melvin, Joseph M.	
STREET ADDRESS	521 Fifth Avenue, 4th Fl.	
CITY- ST- ZIP	New York, NY 10175	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY- ST- ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY- ST- ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY- ST- ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY- ST- ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY- ST- ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY- ST- ZIP	

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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, changed or added in attachment with an address

SIGNATURE: _____ 4/13/98 (212) 808-2080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (9/96)