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

CORPORATION **Å**NNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9200001575 (9)  1. Corporation Name										
BIJOUX L	ADY, INC.									
Principal Place of Bu	siness	Με	iling Address				***	AL WUITS WURST	<b>1910</b>	
2206 HOLLYWOOD BLVD. HOLLYWOOD FL 33020			2206 HOLLYWOOD BLVD. HOLLYWOOD FL 33020							
US			US				Date Incorporated or Qualified     11/03/1992		e of Last   <b>04/06/</b> 1	
2. Principal Place of	Business	2a. 26	Mailing Address				4. FEI Number 65-0366758			Applied For Not Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #. etc.				5. Certificate of Status Desired			5 Additional Required
City & State		28	City & State				Election Campaign Financing     Trust Fund Contribution			00 May Be ed to Fees
Zip 4	Country 25	2:9	Zipi	30	untry	,	8. This corporation has liability for Florida Statutes	intangible ta No	ax under	s 199.032,
	Name and Address of Curr	ent Regis	tered Agent			T	10. Name and Address of New F	legistered	Agent	
MANELLA, F	ROSS				81	Name	(D.O. Day Mumber in Not Accordan	)(a)		
· 2206 HOLLY	ywood blvd.				82		ress (P.O. Box Number is Not Acceptate			
HOLLYWOO	DD FL 33020								lac l	Za Cada
•					84	,		FL	<b>.</b>   '	?ip Code
or registered ag	provisions of Sections 607.05 lent, or both, in the State of Fi d accept the obligations of, Se	orida. Such	r change was authori	ized by the	ove-r corp	named corpor ocration's boa	ration submits this statement for the pul ird of directors. I hereby accept the app	rpose of ch ointment as	anging its registere	registered officed agent. I am
SIGNATURE	re, typed or printed name of registered ag	gent and blic if a	во, ксаble (N	lÖTE: Registere	id Āger	nt signature require	ed when renstating)	DATE		
12.	OFFICERS A	AND DIREC		13.			ADDITIONS/CHANGES TO OFF	ICERS AND		
<b>I</b>	PSTD		DELETE		TITLE				Change	Addition
	DE TULLIO, LEONARD 16445 COLLINS AVE., 05	2021			NAME CLOCK!	I ADDRESS				
	MIAMI BCH. FL 33160	2821				S1-7IP				
TITLE			DELETE		TITLE				Change	Addition
NAME				2 2	NAME					
STREET ADDRESS				23	STREET	I ADDRESS				
CITY-ST-ZIP						ST-ZIP			- A	
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CITY-ST-ZIP				4.4	CITY - S	ST - ZIP	40000181 -05/08/9601(	1440	19 <b>4</b> 44:	
TITLE			DELETE		TITLE		***200.00	J-77U	[4]+Change	Addition
NAME					NAME		~~ <u>~</u>			1/
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CITY-ST-ZIP			[] DELETE		CITY-: TITLE	ST-ZIP			Change	e
TITLE NAME					NAME				- Silving	
STREET ADDRESS						1 ADDRESS				
CITY-ST-ZIP						SI-ZIP				
OTHER TOTAL	tify that the information supplic	ed with this	filing is voluntarily fu	raichad an	1 doe	se not qualify:	for the exemption stated in Section 119	0.07(3)(k), Fl	orida Sta	utes. I further
14. I do hereby cen							are and that are almost us aball bare the			
certify that the i	Information Indicated on this a an officer or director of the co k 12 or Block 13 if changed,	nnuel repoi	rt or supplemental ar or the receiver or trus ttackment with an ad	nnual repor lee empow dress.	i is tr ered	ue and accura to execute th	ate and that my signature shall have the his report as required by Chapter 807, F	same lega Iorida Statu	if effect as ites; and	if made under that my name
certify that the i	ck 12 or Block 13 if Changed, A	nnuel repoi	rt or supplemental ar or the receiver or trus ttachment with an ad	nnual repor lee empow dress.	i is tr ered	ue and accura to execute th De Tu	(//~//	e same lega Jorida Statu 9/-	if effect as ites; and	s if made under that my name