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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000018064 (4)

JEWELRY EXPRESSIONS, INC.

1p	out ridge or basiness	
7371	SPARKLING LAKE RD	
ORI 4	MDO FI 32819	

FILED May 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7371 SPARKLING LAKE RD ORLANDO FL 32819 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/04/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 59-3180799 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & Stato City & State 6. Election Campaign Financing \$5.00 May Be 28 Added to Fees 23 Trust Fund Contribution Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. □ No 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 HUEMER, CHRISTINA 7371 SPARKLING LAKE RD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32819 63 City Zip Code 85 11. Pursuant to the provisions of Scotions 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or protect name of registers diagonal and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change 1.1 TITLE TITLE **HUEMER, CHRISTINA** 1.2 NAME 7372 SPARKLING LAKE RD STREET ADDRESS 1.3 STREET ADDRESS **ORLANDO FL** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITL€ 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-2IP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 of the receiver or trusted 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, pupo an all disherent with an addition.

4-12-00