2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

2002 Uniform Business Report (UBR)					FILED		
DOCUMENT # P93000018210 AMR JEWELERS, INC.				Apr 08, 2002 8:00 am Secretary of State			
				04-08-2002 90256 042 ***150.			
	·		<u></u> _				
Principal Place of Business Mailing Address 7500 W. COMMERCIAL BLVD. 7500 W COMMERCIAL BLVD				IVD			
R 18			R 18				
et lauderd US	ALE FL 33319		FT LAUDERDALE FL 333 US	19			
2. Principal F	Place of Busin	umerca BM	3. Mailing Address	MERCIN BLD	T (EDITOR) THE SELECT HILL SELLY BRIEF BRIEF BRIEF BRIEF FRANCE FOR		
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.				<u> </u>	DO NOT WRITE IN THIS SPACE		
City & State			City & State		6E_02064E7	Applied For Not Applicable	
SAME	-	Country S Am E	SAME	Country AME	5. Certificate of Status Desired	dditional	
6. Name and Address of Current Registered Agent				- Name:	7. Name and Address of New Registered Agent		
RETTEEN, ALAN 7500 W COMMERCIAL BLVD R 18					Street Address (P.O. Box Number is Not Acceptable)		
	erdale fl	33319		City	FL Zip Ci	ode	
8. The above	named entity	submits this statement for	the purpose of changing its	registered office or regist	tered agent, or both, in the State of Florida.		
SIGNATURE .						{	
	Signature, typed o	or printed name of registered agent an		E: Registered Agent signature requir	red when reinstating) DATE		
	oration is eligil	ble to satisfy its Intangible			i i		
	*	and elects to do so.	After May 1, 20	!!! FEE IS \$150.00 02 Fee will be \$550.00 ble to Department of Si	Trust Fund Contribution Add	.00 May Be led to Fees	
	requirement a	and elects to do so.	After May 1, 20 Make Check Payat	02 Fee will be \$550.00	Trust Fund Contribution	led to Fees	
(See criter	requirement a ria on back)	ord elects to do so. OFFICERS AND D	After May 1, 20 Make Check Payat	02 Fee will be \$550.00 ble to Department of Si	tate Trust Fund Contribution. Add	RS IN 11	
(See criter	PVST RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18	After May 1, 20 Make Check Payat IRECTORS Delete	02 Fee will be \$550.00 ble to Department of Si	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 11	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST RETTEEN, 7500 W C FT LAUDE	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL	After May 1, 20 Make Check Payat IRECTORS Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 11 Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payat IRECTORS Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TIITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 11 Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN,	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payat IRECTORS Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	IRS IN 11 RE Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE- NAME	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payat RECTORS Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	IRS IN 11 RE Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payab IRECTORS Delete Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	PRS IN 11 Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE- NAME STREET ADDRESS STREET ADDRESS	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payat RECTORS Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	PRS IN 11 Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payab IRECTORS Delete Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change Change	PRS IN 11 Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payab IRECTORS Delete Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TIITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change Change	PRS IN 11 Addition Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payab IRECTORS Delete Delete Delete Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TIITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change Change	PRS IN 11 Addition Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME NAME NAME	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payab IRECTORS Delete Delete Delete Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TIITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change Change	RS IN 11 Addition Addition Addition	
(See criter) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE-NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1	After May 1, 20 Make Check Payab IRECTORS Delete Delete Delete Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change Change Change	RS IN 11 Addition Addition Addition	
(See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE- NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST RETTEEN, 7500 W C FT LAUDE D RETTEEN, 7500 W C FT LAUDE	OFFICERS AND D ALAN OMMERCIAL BLVD, R 18 RDALE FL ALAN OMMERCIAL BLVD., R 1 RDALE FL	After May 1, 20 Make Check Payab IRECTORS Delete Delete Delete Delete Delete Delete	02 Fee will be \$550.00 ble to Department of Si 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trust Fund Contribution. Add ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Change Change Change	PRS IN 11 Addition Addition Addition Addition	

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR