

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000025049 (6)

Corporation Name
ANDERSON JEWELERS INC.



Principal Place of Business
1036-46 DUNN AVENUE
JACKSONVILLE FL 32218

Mailing Address
1036-46 DUNN AVENUE
JACKSONVILLE FL 32218

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/06/1993		3a. Date of Last Report 04/25/1995	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FET Number 59-3036370		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. Zip	Country	28. Zip	Country	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. 25.		29. 30.		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ANDERSON, FRANK 1036-46 DUNN AVENUE JACKSONVILLE FL 32218				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City			
				FL 85. Zip Code			

11. Pursuant to the provisions of Sections 607.0507 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 607.0705, Florida Statutes.

SIGNATURE

(Signature of officer or director, or the registered agent, required when registering.)

(Signature of Registered Agent required when registering.)

2-21-96

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
2. NAME		2.1 NAME	
3. STREET ADDRESS		3.1 STREET ADDRESS	
4. CITY, ST, ZIP		4.1 CITY, ST, ZIP	
5. TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
6. NAME		6.1 NAME	
7. STREET ADDRESS		7.1 STREET ADDRESS	
8. CITY, ST, ZIP		8.1 CITY, ST, ZIP	
9. TITLE	☐ DELETE	9.1 TITLE	☐ Change ☐ Addition
10. NAME		10.1 NAME	
11. STREET ADDRESS		11.1 STREET ADDRESS	
12. CITY, ST, ZIP		12.1 CITY, ST, ZIP	
13. TITLE	☐ DELETE	13.1 TITLE	☐ Change ☐ Addition
14. NAME		14.1 NAME	
15. STREET ADDRESS		15.1 STREET ADDRESS	
16. CITY, ST, ZIP		16.1 CITY, ST, ZIP	

14. I do 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 or changes or on an attachment with an address.

SIGNATURE:

Frank Anderson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-21-96

DATE

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CR2E034 (12/95)