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

Mailing Address
4270 ALOMA AVENUE

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

4270 ALOMA AVENUE



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000012652 (1)

GORFINE & COMMINGS CUSTOM JEWELERS, INC.

	TE. 144	99709	STE. 144 Winter Park Fl. 32782				DO NOT WRITE IN THIS SPACE	
WINTER PARK FL 32782			WHITEN FANK IL GETEE				3. Date Incorporated or Qualified	
							02/09/1994	
2.	Principal Plac	e of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For	
21	·	26					58-2099611 Not Applicable	
	Suite, Apt. #.						S8 75 Additional	
22	27						5. Certificate of Status Desired Fee Required	
City & State			City & State	City & State			Election Campaign Financing \$5.00 May Be	
23			28				Trust Fund Contribution Added to Fees	
	Z lp	Country	Zφ	Cou	Country		8. This corporation owes or has paid the current year Intangible	
24		25	29	30			Personal Property Tax due June 30.	
		9. Name and Address of Curi	rent Registered Agent		1		10. Name and Address of New Registered Agent	
		INE , JAMES			81	Name	e	
	341 8	ANDSPUR ROAD			82	Street /	et Address (P.O. Box Number is Not Acceptable)	
MAITLAND FL 32751								
					83			
					84	City	85 Zip Code	
						·	FL []	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered 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.								
SI	GNATURE							
<u> </u>	Sig	nature typed or printed name of registered				nt signature	ure required when reinstating) DATE	
12			AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TIT		0	☐ DELETE	1.1 T			☐ Change ☐ Addition	
NA		GORFINE, JAMES		1.2 N				
STE		341 SANDSPUR ROAD		1.3 S	TREET	ADDRESS	S	
		MAITLAND FL 32751			ITY-ST	I-ZIP	Character DAMES	
TIT		D	DELETE	2.1 7			☐ Change ☐ Addition	
NAME		COMMINGS, STEVEN W		2.2 N	AME			
STE		9425 BELMONT TERRACE		2.3 S	TREET	ADDRESS	S	
СП	Y-ST-ZIP	OVIEDO FL 32765			CITY - S	T - ZIP		
TIT	LE		☐ DELETE	_			Change Addition	
NA	ME			3.2 N				
ST	REET ADDRESS			3.3 S	IREE1	ADDRESS	S	
	Y-ST-ZIP	<u> </u>			CITY - S	T - ZIP		
TIT	LE		☐ DELETE	4.1 7			Change Addition	
NA	ME				NAME			
STI	REET ADDRESS			435	TREET	address	S	
	Y-ST-ZIP				CITY-\$1	i - ZiP	T Ohmor Madding	
TIT	LE		DELETE	511			Change Addition	
NA	ME			5.2 N	IAME			
STI	REET ADDRESS			5.3 S	STREET	ADDRESS	S	
CIT	Y-ST-ZIP		····		HY-\$1	T - ZIP		
TIT	LE		DELETE	6.11	ITLE		Change Addition	
NA:	ME			6.2 N	IAME			
STI	REET ADDRESS			6.3 S	STREET	ADDRESS	\$	
Cit	Y-ST-ZIP				CITY-ST			
14. I 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 if changed, gor an attachment with an address.							