PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000026542 1. Corporation Name

B & R JEWELERS, INC.

Principal	Place	of	Business				

10575 68TH AVENUE NORTH

Mailing Address

10575 68TH AVENUE NORTH

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90118 025 ***150.00



SUITE D-2 SEMINOLE FL 33772		SUITE D-2 SEMINOLE FL 33772		DO NOT WRITE IN THIS SPACE				
SEMINOLE PL 337/2				3. Date Incorporated or Qualifed	}			
				04/07/1994				
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For			
21 1442	16 MARK DR	26 PO BUY	68	59-3249086	Not Applicable			
21 14426 MANK DN 26 P-O BOX Suite, Apt. #, etc. Suite, Apt. #, etc.				l e Codiforto of Status Desired ()	3.75 Additional			
27					Fee Required			
City & State City & State City & State			FL.	-6. Election Campaign Financing \$5.00 May Be				
23			•	Trust Fund Contribution Added to Fees				
·	Zip Country Zip Count			8. This corporation owes the current year Intangible				
24 65/	7 4 25	29 33774 30	<u> </u>	Personal Property Tax.				
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name A								
FELDER, BENJAMIN				Name RICHAND BOSMAN				
10575 68TH AVENUE NORTH			82 Street	82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE D-2			83	4426 MARK BA	-			
SEMINOLE FL 33772			03		·			
			84 City L	4 City L KN Lo FL 85 Zip Code 3 3 7 7 4				
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes, 1	the above-named	corporation submits this statement for the purpose of change	ing its registered			
office or re	egistered agent, or both in the State of	Florida, Such change was authors of Section 607 0505, Florida	orized by the corpo	pration's board of directors. I hereby accept the appointmen	t as 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 607.0505, Florida Statutes. SIGNATURE								
SIGNATURE	Signature, types or printed name of registered agent a	nd title if applicable. (NOTE: Reg	istered Agent signature n	equired when reinstating) DATE				
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIF				
TITLE	DP	☐ DELETE	1.1 TITLE	<i>₽₽</i> □¢	hange 🔲 Addition			
NAME ·	BOSMAN, BETH A		1.2 NAME	- h				
STREET ADDRESS	I 10575 68TH AVENUE NORTH, SUITE D-2		1.3 STREET ADDRESS	14426 MANK DA				
CITY-ST-ZIP	SEMINOLE FL 33772		1.4 CITY-ST-ZIP	LANCE FL 33774				
TITLE	DVST	☐ DELETE	2.1 TITLE		hange Addition (
NAME	BOSMAN, RICHARD I		2.2 NAME					
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CITY-ST-ZIP	SEMINOLE FL 33772		2. 4 CITY-ST-ZIP	CANCO F. (337)	4			
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NAME			5.2 NAME					
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CITY-ST-ZIP			5.4 CITY-ST-ZIP	·				
TITLE		☐ DELETE	6.1 TITLE		hange			
NAME	•		6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
				** : *	·			

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, or on an attachment with an address, with all other like empowered.

医贫品 经收益证据 SIGNATURE: MICHANINA