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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000009007 (2)

1. Corporation Name

RAMOS JEWELRY & REPAIR, INC.

Principal Place of Business

7200 US 19 NORTH
PINELLAS SQUARE MALL
PINELLAS PARK FL 34665
US

Mailing Address

4747 W. WATERS AVE.
APT. 1104
TAMPA FL 33614-1435

3. Date Incorporated or Qualified
01/30/1995

3a. Date of Last Report
04/15/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 33781

Country

25

2a. Mailing Address

26 8301 43rd Way N.

Suite, Apt. #, etc.

27 City & State

28 Pinellas Park, FL

29 Zip

30 33781

Country

U.S.

4. FEI Number

59-3290586

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

RAMOS, JUAN A
7200 US 19 NORTH
PINELLAS SQUARE MALL
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

33781

11. Pursuant to the provisions of Sections 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-23-97

12. OFFICERS AND DIRECTORS

TITLE PVT
NAME RAMOS, JUAN A
STREET ADDRESS 4747 WEST WATERS AVENUE #1104
CITY-ST-ZIP TAMPA FL 33614

TITLE S
NAME DUENO, IVETTE M
STREET ADDRESS 8301 43RD WAT N.
CITY-ST-ZIP PINELLAS PARK FL 34465

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/V
1.2 NAME
1.3 STREET ADDRESS 8301 43rd Way N.
1.4 CITY-ST-ZIP Pinellas Park, FL 33781

2.1 TITLE S/T
2.2 NAME RAMOS, Ivette M.
2.3 STREET ADDRESS 8301 43rd Way N.
2.4 CITY-ST-ZIP 33781

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: Juan A. Ramos

4-23-97 (813) 521-3387

CR2E034 (9/96)