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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000010119 (2)

EAR-RESISTIBLE JEWELRY, INC.

Principal Plac	e of Business	Mailing Address			
386 CARRINGTON DR.		1304 S.W. 160TH AVE.			
FT. LAUDERDALE FL 33326		SUITE 358 SUNRISE FL 33326		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2 Principal P	Place of Business	2a. Mailing Address		02/03/1995 4. FEI Number	Applied For
21	acc of Business	_ ~ ~ /)	Naton Or.	65-0553226	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	3 102 01.	5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Stat	that El	City & State	E1	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7ip	Country	8. This corporation owes or has paid the curr	
24	25	29 <i>3332</i> 6 3	O USA	· · · · · · · · · · · · · · · · · · ·	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered A	gent
MITCHEL & ASSOCIATES, P.A. 2990 INTERNATINAL DR 100 SE 2 ST MIAMI FL 33131					. A.
1 1961-	AMI FL 33131		24	·	1221 - 2
			84 City	_{ami} FL	85 Zip Code 33/33
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 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 Statules. Signature, typed or printed name of registered lagent mediated in graduations. (NOTE Registered Agent signature required when reinstating) DATE D					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITL€		Change Addition
NAME	CANTER, LORI M		1.2 NAME		
STREET ADDRESS	386 CARRINGTON DR. FT. LAUDERDALE FL 33326		1.3 STREET ADDRESS		İ
CITY-ST-ZIP	V	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	CANTER, HAL	_	2.2 NAME		
STREET ADDRESS	386 CARRINGTON DR.		2.3 STREET ADDRESS		
CITY+ST-ZIP	FT. LAUDERDALE FL 33326		2. 4 CITY-ST-ZIP		
TITLE	T MANOEL MAN	☐ DELETE	3.1 TITLE	•	Change Addition
NAME	MAISEL, JAN 11460 SW 105 TERR.		3.2 NAME		
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33176		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE	***************************************	DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		-
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DECETE	5.1 TITLE		Change
NAME OWNER ADDRESS			5.2 NAME		
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition

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 arrival 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 13 if changed, or open attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS