DOCUMENT # P95000013658

1. Corporation Name

MILANO JEWELRY CORPORATION

DIVISION OF CORPORATIONS

FILED Jan 25, 1999 8:00am FLORIDA DEPARTMENT OF STATE **Katherine Harris Secretary of State** Secretary of State

01-25-1999 90061 029 ***150.00

	,		

					#84124Bi isa ibiat gitti delit antır anıır anıır	*** **** **** ***		
Principal Place	of Business	Mailing Address			,		-	
2299 S.W. 37TH AVE. SUITE 301 MIAMI FL 33145 US		2299 S.W. 37TH AVE. Suite 301 Miami Fl 33145 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/16/1995			
21	26				65-0557964	\$8.75 AG		
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	Fee Req		
22					6. Election Campaign Financing	\$5.00 N	May Be	
City & State City & State				Trust Fund Contribution Added to			•	
23 Zin Country Zi		Zip	Zip Country		8. This corporation owes the current year Inta	ngible ·		
Zip	25	29 30	-	•	Personal Property Tax.	Yes	□No	
24	9. Name and Address of Current		<u>'</u>		10. Name and Address of New Registered	lgent		
	or realise directions		8	Name				
	O'ROURKE, JOHN III 2299 SW 37TH AVENUE		8:	2 Street Add	ress (P.O. Box Number is Not Acceptable)			
						2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	
	TE 301		8:	3				
MIAI	MI FL 33145		8.	4 City	g 44 g	85 Zip C	ode	
				1	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appoin		***************************************	
SIGNATURE	Signature, typed or printed name of registered agent			ent signature requir	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	
12.	OFFICERS AND	D DIRECTORS	13.		ADDITIONS/CHARGES TO ST. ISERS 7.1.	Change	Addition	
TITLE	DVP	□ netre i	1.2 NAME					
NAME.	O'ROUKE, JOHN III			ET ADDRESS				
STREET ADDRESS		*•	1.4 CITY	ŧ				
CITY-ST-ZIP	MIAMI FL DP	☐ DELETE	2.1 TITLE		·	☐ Change	Additio	
TITLE	TINOCO, JUAN A		2.2 NAM	.		-		
NAME . STREET ADDRESS	ACCOUNT OF THE AVE CHITE 201		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	MIAMI FL		2. 4 CITY	'-ST-ZIP		Chassa	☐ Additio	
TITLE	DS	☐ DELETE	3.1 TITLE			Change	Additio	
NAME	TINOCO, MARIA E		3.2 NAM	E				
STREET ADDRESS	ARRANGE AND AND AND AND AND			ET ADDRESS	•.			
CITY-ST-ZIP	MIAMI.FL		3.4. CITY			Change	Additio	
TITLE	DT	☐ DELETE	4.1 TITLE			J-	_	
NAME	O'ROURKE, MARIA E		4.2 NAM			•		
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP	MIAMI FL	DELETE	5.1 TITL	-ST-ZIP		☐ Change	Addition	
TITLE		_ 522216	5.2 NAM	1	•			
NAME	<u>, </u>		i .	EET AODRESS				
STREET ADDRESS	S		5.4 CITY	+ST-ZIP	; 			
CITY-ST-ZIP TITLE	1	☐ DELETE	6.1 TITL	E		Change	☐ Additio	
			6.2 NAM	E				
NAME	e		6.3 STR	EET ADORESS				
STREET ADDRESS	9		6400	(CT 710	•			

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 chapter or on an appear with an address, with all other like empowered.

SIGNATURE:

SIGNING OFFICER OR DIRECTOR