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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000022933 (2)

YANINA JEWELERS, INC.

Principal Place of Business

Mailing Address

FILED May 01 1997 8:00am Secretary of State



21691 SOUTH STATE ROAD 7 BOCA RATON FL \$3428		21691 SOUTH STATE ROAD 7 BOCA RATON FL 33428-1813						
					3. Date Incorporated or Qualified 03/20/1995	3a. Date 10/25		teport
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number			oplied For
21		26	- I		65-0563515			ot Applicable
Suite, Apt.		Suile, Apt. #, etc.	27		5. Certificate of Status Desired			Additional equired
City & State	θ	City & State 28			Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25		30 Cou	ntry		Yes 🗍	Vο	: 199.032,
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Age	nt	
	Eyek, Igor			81 Name				
351	NW 37TH WAY			82 Street Add	dress (P.O. Box Number is Not Acceptab	le)		
DEE	RFIELD BEACH FL 33442			5,,00,,,00	(i e i e c			
*				83				
·				84 City		FI	35 Zip	Code
11. Pursuant	to the provisions of Sections 607 05	02 and 607,1508. Florida Statute	s the at	oove-named cor	rooration submits this statement for the p		anging if	ts registered
office or r	registered agent, or both, in the State	e of Florida, Such change was a	uthorize	by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	t the appoin	lment as	registered
-	in ramiliar with, and accept the oblig	gations or, Section 607:0505, Flo	กดส อเสเ	utes.				
SIGNATURE	Signature, typed or printed name of registered a	gent and the if applicable (NOT)	Registere	d Agent signature requ	uired when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	··	RECTOR	3S IN 12
TITLE	DP	☐ DELETE	1.1 10	ILE			Change	Addition
NAME	OLEYEK, IGOR	EYEK, IGOR 1.21		IME				
STREET ADDRESS	352 NW 37TH WAY		1.3.51	REET ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL 3344	2		TY - \$1 - ZIP				
TITLE	DST DELETE 2.17		2.1 11				Change	Addition
NAME			2.2 N/	ME.				
STREET ADDRESS	4157 N.W. 6TH STREET		2.3.51	REET ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL 3344	2		HTY-SI-ZIP				
TITLE		DELETE	311		, , , , , , , , , , , , , , , , , , ,		Change	☐ Addition
NAME			3.2 N/	AME:				
STREET ADDRESS			3.3 \$1	REEL ADDRESS				
CITY-ST-ZIP			3.4 C	ITY - ST - ZIP				
TITLE		☐ DELE1E	4.1 1				Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 ST	REET ADDRESS				
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP				,)
TITLE		DELETE	5111			/1	Change	Addition
NAME			5.2 N	AME .			51	1/1/21
STREET ADDRESS			5.3 \$1	REET ADDRESS		L4/1.	- V	1/98
CITY-ST-ZIP				TY - ST - 21P		1///	1	117
TITLE			6.1 1				-Change	Addition
NAME			6.2 N	N F	_05/06/970101	nono.o qnc4	£	
STREET ADDRESS			6.3 \$1	REET ADDRESS	***165.00	IU UUT		
CITY-ST-ZIP				TY-ST-ZIP	***103.UU			

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.

CIONATURE.

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