FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 - PROFIT FLORIDA DEPARTMENT OF STATE Jun 11 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State ;1**99**8 DIVISION OF CORPORATIONS **DOCUMENT #** P95000022933 1. Corporation Name YANINA JEWELERS, INC. Principal Place of Business Malling Address 21691 S. STATE RD. 7 21691 S.STATE RD. 7 DO NOT WRITE IN THIS SPACE BOCA RATON, FL 33428 **BOCA RATON, FL 33428** 3. Date Incorporated or Qualified 03/20/95 FEI Number 65-0563515 2. Principal Place of Business 2a. Mailing Address Applied For 26 21 Not Applicable Sulte, Apt. #, etc. Suite, Apt.#, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required City & State City & State 6. Election Campaign Financing \$5,00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent YAN OLEYEK IGOR OLEYEK treet Address (P.O. Box Number Is Not Acceptable)
57 NW 6TH STREET 352 NW 37 WAY 83 **DEERFIELD BEACH, FL 33442** DEERFIELD BEACH, FL 33442 Zip Code 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 Froida. 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. ent signature required when reinstating) SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Age 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. CRZE034 (10/97 DIRECTOR TITLE DELETE 1.1 TITLE Change Addition YAN OLEYEK NAME 1.2 NAME STREET ADDRESS 4157 NW 6TH STREET 1.3 STREET ADDRESS CITY - ST - ZIP DEERFIELD BEACH, FL 33442 1.4 CITY - ST - ZIP DIRECTOR TITLE X DELETE 2 1 TITLE Change Addition IGOR OLEYEK NAME 2 2 NAME STREET ADDRESS 352 NW 37 WAY 2.3 STREET ADDRESS DEERFIELD BEACH, FL 33442 CITY - ST - ZIP 2.4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE 5.1 TITLE DELETE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE 90000. NAME 6.2 NAME -06/12/98--01059--019 STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP ***150,00 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 seceiver 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 or an attachment with an address.

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR