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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000034766 (2)

FAITH LINE JEWELRY, INC.

FILED Mar 03 1998 8:00am Secretary of State

0.1						-{	
Principal Plac	e of Business	Mailing Address					
855 N.W. 3RI		855 N.W. 3RD AVENUE					
BOCA RATON FL 33432-2645 BOCA RATON FL 33432-2645		2645			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	
						,	
3 Principal P	lace of Business	2a. Mailing Address				05/04/1995 4. FEt Number Applied	
	lace of Business	├ ─ '				1	
21	4 Ato	26 Suito Apt # etc					plicable
Suite, Apt.	├		5. Certificate of Status Desired Fee Regular				
City & Stat		City & State			 		
	e	City & State			6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe		
23	Country	28 Zin	1 600	urates e			
Zip	Country	Zip	-	ıntry		8. This corporation owes or has paid the current year Intangit	
24	25	29	30	T		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Current	r registered Agent		81	Name	10. Name and Address of New Registered Agent	-
	DD, CHRISTOPHER ESQUIRE			ا"ا	Ivallie]
)1-A W. PALMETTO PARK RD. #3	305C		82 Street Address (P.O. Box Number is Not Acceptable)			
BQ	CA RATON FL 33433						
				83			
				84	City	po 85 Zip Code	
					•	FL `` `	ł
11. Pursuant	to the provisions of Sections 607.0502	2 and 607,1508, Florida Statut	es, the al	bove d by	-named corporation	oration submits this statement for the purpose of changing its reg on's board of directors. I hereby accept the appointment as regis	istered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fig	orida Stat	tutes	ine corporation.	on a bodic of directors. This boy accept the appointment as regis	10100
SIGNATURE							
	Signature, typed or printed name of registered agen			d Ape	nt signature require		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	Р	DELETE	1.1 Tr	TLE		☐ Change ☐	Addition
NAME	HIGH, MARYLIN		1.2 N	AME		·	
STREET ADDRESS	855 N.W. 3RD AVE.		1.3 \$1	REET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432		1.4 CI	TY+S	T-ZIP		{
TITLE	S	DELETE	2.1 TI	TLE		Change	Addition C
NAME	HIGH, EUGENE D		2.2 N/	AME]
STREET ADDRESS	855 N.W. 3RD AVENUE		2.3 ST	REET	ADDRESS		- 1
CITY-ST-ZIP	BOCA RATON FL 33432		2.4 C	ITY-S	T-ZIP		
TITLE		☐ DELETE	3.1 TI	TLE		☐ Change ☐	Addition
NAME			3.2 N/	AME			1
STREET ADDRESS			3.3 ST	REET	ADDRESS		1
CITY-ST-ZIP			3.4. C				-
TITLE		DELETE	4.1 []			Change	Addition
NAME			4.2 N	AME	1	- • -	j
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			4.4 CI				1
TITLE		DELETE	5.1 TI		1.516	☐ Change ☐	Addition
NAME		C occur	5.1 N			Criange	
	l						- 1
STREET ADDRESS					ADDRESS		
CITY - ST - ZIP		D DECE	5.4 CI	_	- ZIP		4.4420
TITLE		☐ DELETE	6.1 TI			☐ Change ☐	Addition
NAME		•	6.2 NA				
STREET ADDRESS			6.3 ST	REET	Address		
CITY-ST-ZIP			6.4 CI	TY- \$1	[-ZIP		

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 changed, or on an attachment with an address.