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

PROFIT CORPORATION **ANNUAL REPORT**

1998

ACUNA, JOSE 3448 S.W. 8TH ST.

MIAMI FL 33135



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000045682 (8)

g. Name and Address of Current Registered Agent

EL DANUBIO JEWELRY, CORP.

Principal Place of Business Mailing Address 3448 S.W. 8TH ST. 3448 S.W. 8TH ST. MIAMI FL 33135 MIAMI FL 33135 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/13/1995 2. Principal Place of Business 2a. Mailing Address FEI Number 21 26 65-0587636 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing Trust Fund Contribution 23 28 Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30.

City 85 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 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 Statutes.

81 Name

82

83

SIGNATURE Signature, typied or printed name of registered agent and title (Fapplicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change 11 TITLE TITLE TAUSK, HENRY 12 NAME 3448 S.W. 8TH ST. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33135 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition DEFEA TITLE 2.1 TITLE 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-SI-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE 4.1 TiTLE Change Addition TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 6.1 TITLE TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIF

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 of 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.

SIGNATURE: X

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ No

Not Applicable

FILED

Apr 20 1998 8:00am

Secretary of State

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)