

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000049745 (9)

1. Corporation Name

BEST SELLERS JEWELRY CORPORATION, INC.



Principal Place of Business

1135 PASADENA AVENUE SOUTH
SUITE 140
ST. PETERSBURG FL 33707

Mailing Address

1135 PASADENA AVENUE SOUTH
SUITE 140
ST. PETERSBURG FL 33707

3. Date Incorporated or Qualified
06/26/1995

3a. Date of Last Report

2. Principal Place of Business

21 20505 US HWY 19 N

2a. Mailing Address

26 20505 US HWY 19 N

4. FEI Number

59-3322421

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Clearwater FL

28 Clearwater FL

Zip

Zip

24 34624

25 Pinellas

29 34624

30 Pinellas

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~CORPORATION SERVICE COMPANY~~
~~1201 HAYS STREET~~
~~TALLAHASSEE FL 32301-2625~~

81 Name

Ioannis Hatziliias

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

20505 US HWY 19 N

83

84 City

Clearwater

FL

85 Zip Code
34624

11. 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.

SIGNATURE

Signature typed or printed name of registered agent and director or director

Printed Registered Agent's Signature required after filing

DATE

4/26/96.

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Pres/Secty

☐ Change

☒ Addition

1.2 NAME

Ioannis Hatziliias

1.3 STREET ADDRESS

20505 US HWY 19 Clearwater FL 34624

1.4 CITY - ST - ZIP

2.1 TITLE

VP/Treas

☐ Change

☒ Addition

2.2 NAME

Richard Grimes

2.3 STREET ADDRESS

3300 Bonita Bch Rd Bonita Springs FL

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

000001867290
-06/19/96--01083--009

***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Ioannis Hatziliias

4/26/96.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Do not fill in

CR2E034 (12/95)