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 # P95000082556 (8)

GOLDEN GATE JEWELERS II INC.

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## FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					- I CONTROL THE COLOR DIVEL BOTH ENGLY MAIN AND TO THE LEGAL METON WHICH WAS A COLOR		
8211 W. BROWARD BLVD. #200 8211 W. BROWARD BLVD. # PLANTATION FL 33324 PLANTATION FL 33324							
1 Danierio	76 15 00057	TOWNSHIP TO COULT	FEMILIATION IC SOURT		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					10/27/1995		
,	Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26		65-0629126	Not Applicabl		
Suite, Ap	ot #. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & St	tate	City & State			6. Election Campaign Financing	\$5.00 May Be	
29		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Coun	lry	8. This corporation owes or has paid the cur-		
24	25	29	30		, c.coma. report, ran add cano co.	9 ISS □ No	
	9. Name and Address of Curren	t Registered Agent		7	10. Name and Address of New Registered /	Agent	
	ORELICH, LEE		8	Name			
8211 W. BROWARD BLVD. #200			l e	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
P	PLANTATION FL 33324			1			
			<b>8</b>	13	•		
			. ا	4 00		Test zin on di	
			*	4 City	FL	85 Zip Code	
11. Pursuar	nt to the provisions of Sections 607,050	2 and 607,1508, Florida Statute	es. the abo	ve-named core		changing its registered	
office o	r registered agent, or both, in the State	of Florida. Such change was a	authorized	by the corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the app	ointment as registered	
agent. I	i am tamiliar with, and accept the obliga	ations of, Section 607.0505, Fig	orioa Statui	es.			
SIGNATURE	Signature, typed or printed name of registered age	ALCOHOL HANDS AND	F. B		ired when reinstating) DATE		
12.	OFFICERS AND		13.	sgeni signatura requi	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	D	DELETE	1.1 7170		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition	
NAME	KATHEIN, AMIP.		1.2 NAV				
	AAAA INI MBANINABA BILIM			·			
STREET ADDRESS	PLANTATION FL 33324			ET ADDRESS			
CITY-ST-ZIP	D PLANTATION PL 33324	DELETE		-ST-ZIP		The second second	
TITLE	-	DECEIE	2.1 TITL			Change Additio	
NAME	KATHERY, YARON		2.2 NAM	E	•		
STREET ADDRESS	- 1		2.3 STR	ET ADDRESS			
CITY-ST-ZIP	PLANTATION FL 33324			r-ST-ZIP		<u> </u>	
THTLE	D	DELETE	3.1 TITL	E	•	Change Additio	
NAME	KATHEIN, VARDA		3.2 NAM	E			
STREET ADDRESS			3.3 STR	ET ADDRESS			
CITY-ST-ZIP	PLANTATION FL 33324		3.4. CIT	/- ST-ZIP			
TITLE	D	☐ DELETE	4.1 TITU			Change Additio	
NAME	Kathein, annelie		4. 2 NAN	AE			
STREET ADDRESS	s 8211 W. BROWARD BLVD.		4.3 STR	ET ADDRESS			
City-ST-ZIP	PLANTATION FL 33324			-ST-ZIP			
TITLE		DELETE	5.1 TITL			Change Addition	
NAME			5.2 NAM	<b>I</b>			
STREET ADDRESS			1				
	°		•	ET ADDRESS			
CITY-ST-ZIP	<del></del>	DELETE	_	- ST- ZIP		Change Addition	
TITLE		DELETE	6.1 TITU	: 1		☐ Change ☐ Addition	

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.

SIGNATURE:

NAME

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FIE AMIR FIRATHEN

s 4/1/9

(931)5834295.