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PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000095393 (1)

DOCUMENT #

	delli Jewelry Design,	, INC.							
Principal Place of Business 7061 GRAND NATIONAL DRIVE. SUITE 132 ORLANDO FL 32819 Mailing Address 7061 GRAND NATIONAL ORLANDO FL 32819 ORLANDO FL 32819						I IMMITMUT SIM IMIMI MICIOL MUSICI	19 41 1 88111 88118 18	M. B. M. B. 1661.6	19189 1111 1861
				DRIVE. SUITE 132					
						3. Date Incorporated or Qualification 12/14/1995	ed 3a. Date	of Last R	eport
Principal Plac	ce of Business	2a. Mailing Addres	SS			4. FEI Number 65-06	30383		Applied For
<u> </u>		26 Suite, Apt. #,	ele.			82 00	770703		Not Applicable Additional
Suite, Apt. #	, etc.	27 Soite, Apt. #, 1	eic.			5. Certificate of Status Desired		•	Required
City & State		City & State				6. Election Campaign Financin	9 _	\$5.0	May Be
1		28				Trust Fund Contribution		Adde	d to Fees
Zip	Country	Zip		untry		8. This corporation has liability	for intangible to Yes \[\] No	ax under s	199.032,
L	9. Name and Address of Curr	29	30]	· · · · · ·		Florida Statutes 10. Name and Address of Ne		Agent	
	9. Name and Address of Curr	ent negistaled Agent		81 N	ame	IQ. Hamo and Address of No	ii iiogioioioa	- Som	
MODELL	I, GISELE M					(D.O. D. N.)			
	AND NATIONAL DRIVE, SUITE	E 132		82 Street Add		lress (P.O. Box Number is Not Acceptable)			
	O FL 32819	- 111		83					
				100				05 7	o Codo
				B4 C	aty		FL	- 85 Zi	p Code
or registere	o the provisions of Sections 607.05 ed agent, or both, in the State of Flant, and accept the obligations of, Se	orida. Such change was a	authorized by the	corpora	ied corpora tion's boar	ation submits this statement for the d of directors. I hereby accept the	purpose of chappointment as	anging its i registered	registered offic Lagent, Lam
familiar with	n, and accept the obligations of, or	action our outer, rionida c	statutes.						
SIGNATURE _									
SIGNATURE _	Signature, typed or printed name of registered ag	gent and title if applicable.	(NOTE: Registere		nature required	when reinstatings	DATE	DIBECTO	DRS IN 12
ignature	Signature, typed or printed name of registered ag	gent and title if applicable.	(NOTE: Registere		nature required	when reinstating) ADDITIONS/CHANGES TO	OFFICERS ANI		DRS IN 12
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04/24/96

(407)3634499

Daytime Phone #

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