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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 12 1997 8:00am Secretary of State

	1997								
	MENT # P96000 NAME BLE TREASURES, INC.		(i) 33) (5 (1 3) (5	161: 811116 1818	\$ 11% 1 .1%				
Principal Plac	o of Puninger	Mailing Address		·					
3500 MAGELLI AVENTURA FL	AN CIR #713	3500 MAGELLAN CIR #7 AVENTURA FL 33180-375						-	
					3. Date Incorporated or Qualified 03/13/1996	3a. Date	of Last Re	eport	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 65-064688			plied For t Applicable	-
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	Additional	1
City & Stat	0	City & State			6. Election Campaign Financing		\$5.00		1
23		28			Trust Fund Contribution		Added to	o Fees	_
Zip 24	Country 25	Zip [29]	Cour	itry	This corporation has liability for Florida Statutes	intangible ta Yes 🔲		199.032,	-
	9. Name and Address of Curre		1901		10. Name and Address of New R				
	BINTON, JEFFREY A		1	B1 Name					
	01 BISCAYNE BLVD STE 505		8:		dress (P.O. Box Number is Not Acceptable)				1
AVE	NTURA FL 33180				,				4
			\ <u>'</u>	03					1
			[7	B4 City		FL	85 Zip C	Code	7
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statu	utes, the ah	ove-riamed cor	poration submits this statement for the	purpose of c	L hanging its	s registered	1
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliq	e of Florida. Such change was gations of, Section 607.0505, F	s authorized Torida Statu	by the corporates.	rporation submits this statement for the ation's board of directors, I hereby acce	pt the appoir	ntment as i	registered	-
SIGNATURE								··	1
12.	OFFICERS AN	ocot and title if applicable (NO ND DIRECTORS	Die Registered	Agent signature requ	ured when reinstating) ADDITIONS/CHANGES TO OFFI	CERS AND F	HRECTOR'	S IN 12	16
TITLE	D	DELETE	1.1 101	Ē			Change	Addition	18
NAME	RUBINTON, BETTINA		1.2 NAM	ME					1
STREET ADDRESS	3500 MAGELLAN CIR #713		1.3 STR	EFT ADDRESS					Š
CITY-ST-ZIP	AVENTURA FL 33180			r - ST - ZIP		-			ြှစ်
TITLE		[_] DELETE	2.1 1111			L	_] Change	Addition	10
NAME			2.2 NAM						
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS Y-\$1-ZIP					1
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NAME	i.	_	3.2 NAA		•		- •		
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CITY-ST-ZIP			3 4. CIT	Y-81-71P]
TITLE		☐ DELLIE	4.1 7/11	.£		Ĺ.	Change	Addition	
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STREET ADDRESS				EET ADDRESS					1
CITY-ST-ZIP TITLE		DELETE	5.1 TITL	r - \$1 - 2IP			Change	Addition	-
NAME			5.2 NAA	ì		L-) orongo	100(00))
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CITY-ST-ZIP				Y-\$1-ZIP					
TITLE		☐ DELFTE	6.1 1111				Change	Addition	1
NAME			6 2 NAN	AE .					
STREET ADDRESS			6.3 S1R	EE1 ADDRESS					1
ANTY OF SIR			1 0400	/ AT 710					١.

14. I do hereby certify that the information supplied with this filing does not qualify for the examption 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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:

Lettina Rulunton

4-25-97

305-933-4466