SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Aug 03, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE

08-03-1999 90010 045 ***558.75



OCEAN .	JEWELS CLUB, INC.									
Principal Place	e of Business	Mailing Address				, 81(11 80(11 681)) ##JII 8811	R IIURI BIII	Ulibi Billi Olii I	1441	
1111 LINCOLN RD. SUITE 800		1111 LINCOLN RD. SUITE 800								
MIAMI BEACH FL 33139		MIAMI BEACH FL 33139			DC DC	DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated			<u> </u>		
					03/22/1996				Ì	
2. Principal P	Place of Business	2a. Mailing Address		.	4. FEI Number			Applied Fo	or	
21		26			65-0651480			Not Applic		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status	5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & State	***************************************	City & State			6 Floring Co					
City & Stat	te	28			6. Election Campaign Trust Fund Contrib	- 11		. 00 May Be		
23 Zip	Country	Zip	Coun	ITY	8. This corporation ov		70	de0 to 1 ees		
24	25	29	30		Intangible Persona	-	Yes	No		
	9. Name and Address of Curren	··	100		10. Name and Addres		d Agent			
			8	1 Name	-	-				
	NER, MICHAEL B		1	32 Street	Address (P,O. Box Number is	Not Acceptable)		···-	 i	
	LINCOLN RD, SUITE 800									
MIMIM	AI BEACH FL 33139			33						
			1	4 City		F	85	Zip Code		
11. Pursuant	t to the provisions of sections 607.0502	2 and 607.1508. Florida Statute	s, the abov	/e-named (corporation submits this stateme	ent for the purpose of	changing	its registered		
office or		of Florida, Such change was a ations of, section 607.0505, Flo	authorized orida Statu	by the corp	ooration's board of directors. I h	ent for the purpose of hereby accept the app	changing ointment	its registered as registered		
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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:

KOUITED

Daytime Phone #