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 # P9600036611 (7)

A. & O. JEWELRY MINI CORP.

Principal Place of Business Mailing Address						AK IIA IBIIA BIIIA BAKI BAKI	. 03114 64100 1414 61			
3001 WEST 12 AVENUE HIALEAH FL 33012		3001 WEST 12 AVENUE HIALEAH FL 33012			DO NOT WRITE IN THIS SPACE					
						orporated or Qualified	1			
2. Principal f	Place of Business	2a, Mailing Address			04/24/ 4. FEI Numb				plied For	
21	— h					664046		<u> </u>	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							Additional	
22		27				e of Status Desired	"	Fee Re	quired	
City & Star	te -	City & State				Campaign Financing		\$5.00		
Zip	Country Zip					d Contribution	<u> </u>	Added t		
24	25		Countr 30	,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
CRESPO, ANGELA				Name	ame					
4181 WEST 19 AVENUE			82	Street	Address (P.O. Box N	ress (P.O. Box Number is Not Acceptable)				
HIALEAH FL 33012					Talloo (1.5. Box Valloci 10 110) Tooptaboy					
			83							
			84	City				15 Zip (Code	
44 Pureuant	to the provisions of Sections 607.050	2 and 607 1509 Florida Clatuta	s the abov		openaration automita	this statement for the	FL			
office or i	registered agent, or both, in the State.	of Florida, Such change was a	uthorized h	r tha car	oration's board of di	rectors. I hereby acc	ept the appoint	inging its	s registerea registered	
	im familiar with, and accept the obliga	ations of, Section 607.0505, Flor	rida Statute	S.						
SIGNATURE	Signature, typed or printed name of registered age	nt and fitte if applicable (NOTE	Registered Ag	ent signature	equired when reinstating)		DATE			
12.	OFFICERS AND	O DIRECTORS	13.		ADDITIONS	S/CHANGES TO OFF	ICERS AND DIF	RECTOR	S IN 12	
TITLE	PD	☐ DELETE	1.1 TRILE		157.D.		K	Change	☐ Addition	
NAME			1.2 NAME		95CAR B	写いけ石て				
STREET ADDRESS	4181 WEST 19 AVENUE		1.3 STREET ADDRESS		4181 W	9 AVA				
CITY-ST-ZIP TITLE	HIALEAH FL 33012 VD			T-21P	tialea.	4- E 33		0	T value	
NAME	TRIUJEQUE, JORGE		2.1 TITLE 2.2 NAME				L	Change	[] Addition	
STREET ADDRESS	5371 WEST 12 AVENUE		2.3 STREET ADDRESS							
CITY-ST-ZIP	HIALEAH FL 33012		2. 4 CITY-ST-ZIP							
TITLE			3.1 TITLE	J) EN				Change	Addition	
NAME	CRESPO, ANGELA		3.2 NAME							
STREET ADDRESS	4181 WEST 19 AVENUE		3.3 STREE	ADDRESS						
CITY-ST-ZIP	HIALEAH FL 33012		3.4. C(TY-	ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition	
NAME			4. 2 NAME							
STREET ADDRESS	1		4.3 STREET							
CITY-ST-ZIP		☐ DELETE	4.4 CITY-5	T - ZIP		~		06	1.2200	
TITLE NAME		רי הנינוני <u>רי</u>	5.1 TITLE 5.2 NAME					Change	Addition	
STREET ADDRESS			5.2 NAME 5.3 STREET	ADDDECC						
CITY-ST-ZIP			5.4 CITY - S							
TITLE		DELETE	6.1 TITLE	1 611	· 			Change	Addition	
NAME	*****		6.2 NAME					-		
STREET ADDRESS			6.3 STREET	ADDRESS						
			=							

CITY-ST-ZIP

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 course attorned to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

FILED Jan 22 1998 8:00am Secretary of State