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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600053954 (9)

PARADISE JEWELRY & WATCHES II, INC.

Sandra B. Mörtham

APPHQYED

97 JUL 30 AM 11: 34

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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Principal Place of Business Mailing Address									•		
4313 DIAMON		4313 DIAMOND ROW									
FORT LAUDERDALE FL 33331		FORT LAUDERDALE FL 33331-3111									
						3.	Date Incorporated 06/24/1996	l or Qualified	3a. D	ate of Last F	Report
2. Principal	Place of Business	2a. Mailing Address	2a. Mailing Address				FEI Number		-	T JA	pplied For
21		26				65-0	70/63	2	h	ot Applicable	
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.								Additional	
22		27			5.	Certificate of State	us Désired		•	equired	
City & Sta	ate	City & State	City & State			6. Election Campaign Financing \$5.00 May Be					
23	28						Trust Fund Contrib	-			to Fees
Zip	Country	Zip	Cou	intry		8.	This corporation h	as liability for i	ntangible	e tax under s	. 199.032,
24	25	29	30				Florida Statutes		Yes	No No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent											
· - QINUM=MORRIS ->					Name	(S440	SHAM	AT		İ
4313 DIAMOND ROW				82	Street A	Address (P	O. Box Number is	Not Acceptab	194		
FORT LAUDERDALE FL 33331					0110017	431	2 DAAM	ono 1	lon	,	
•				83							
				84	City					05 7in	Codo
				04	City	r 2.	Supplier	us	FL	_ 85 Zip	Code 3 3 1
11. Pursuan	t to the provisions of Sections 607,0502	2 and 607.1508, Florida Statute	s, the al	bouc	named a	cornoratio	n submits this state	ement for the p	urpose o	of changing	ts registered
office or registered agent for both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with a coept the obligations of, Section 607.0505, Florida Statutes.											
	THAML							-4/4	10-	`	
SIGNATURE	Signature, lyped of grin hands a least of ager	nt and title if applicable. (NOTE:	Registe/o	d Agen	it signature i	required when	reinstaling)	-(1-9	DATE	<i>[</i>	
12.	OFFICERS AND) DIRECTORS	13.				ADDITIONS/CHAN	GES TO OFFIC	ERS AN	D DIRECTOR	
TITLE		☐ DELETE	1.1 TI	TLE			PH			Change	Addition
NAME			1.2 N	AME		LIOPE	5 479m 41	•			
STREET ADDRESS	; [1.3 S	ireet A	ADDRESS	4213	DAMON	Row			ļ
CITY-ST-ZIP			1.4 0	TY-ST	- ZIP	PT	6 ANDON	mee !	α	3333/	
TITLE		☐ DELETE	2.1 TI	TLE						☐ Change	Addition
NAME			2.2 N	AME							
STREET ADDRESS	;		2.3 S	REET A	ADDRESS						
CITY-ST-ZIP			2.40	ITY-SI	r- ZIP						
TITLE		DELETE	3.1 11	TLE						Change	Addition
NAME			3.2 N	AME							
STREET ADDRESS	;		3.3 S	TREET A	ADDRESS						
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TITLE		☐ DELETE	4.1 10							☐ Change	Addition
NAME			4. 2 N	IAME							
STREET ADDRESS	.				ADDRESS				,		
CITY-ST-ZIP				ITY-ST				a.a.	100	ι.	
TITLE		DELETE	5.1 1		*"			WAL CO	w	☐ Change	Addition
NAME			5.2 N					7/2	21/2		_
STREET ADDRESS	.				ADDRESS			1/0	49	<i>†</i>	
									1	′	
CITY-ST-ZIP		DELETE	6.1 TI	T) F	- ZIF			······································		☐ Change	Addition
		- OFFEE					0000	noia	40		
NAME OTREET ARROSON	.]		6.2 N		IDDOCCO		-:05/29/	970107	· • • • • • • • • • • • • • • • • • • •	រាវ	
STREET ADDRESS	·		6.3 \$1	IKEE (#	ADDRESS		***495	οι στο: ΜΠ	U U	nu t	

14. I do 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 configuration 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 particular or an attachment with an address.

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