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

Mailing Address 141 NE 3RD AVE., STE, 203

MIAMI FL 33132-2221

CORPORATION ANNUAL REPORT

1997

Principal Place of Business

141 NE 3RD AVE., STE. 203 MIAMI FL 33132



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1997 8:00am

Secretary of State

3a. Date of Last Report

(96/6)

CR2E034

0175740

3. Date Incorporated or Qualified

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000065058 (5)**

GEMS, JEWELRY AND COINS ETC. INC.

appears in Block 12 or Block 13 if chap

SIGNATURE:

08/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, ApL #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 6. This corporation has liability for intangible tax under 6. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WATSON, LORI 141 NE 3RD AVE., STE. 203 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33132** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE filgrunt recity and to printed came of registered against and title if applicable (NCHE. Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DPS Addition DELETE Change TITLE 1.1 TITLE WATSON, LORI 1.2 NAME HAM 150 SE 25TH RD. APT. 9J 1.3 STREET ADDRESS STREET ALURESS MIAMI FL 33129 1.4 CITY - ST - ZIP CITY-ST ZIP DVT DELETE Addition THIE 2.1 TITLE Change BARREDO, PETER 2.2 NAME NAME 150 SE 25TH RD. APT. 9J STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33129 017Y-S1 77 2. 4 CITY-ST-ZIP DELETE THE 3 1 TITLE ☐ Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS Citr-St 3.4 CITY-ST-ZIF DELETE Addition Change 4.1 TITLE THEF N2M4 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 001Y-53 44 CITY-ST-ZIP DELETÉ 5 1 TITLE TiftE NAM: 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CHY ST-ZE 5.4 CITY - ST - ZIP DELETE Mat 6.1 TITLE 80000215 -04/24/97--010012 NAME 6.2 NAME \$1k9 LADORESS 6.3 STREET ADDRESS ***165.00 64 CITY-ST-ZIE 14. To 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 of rector of the corporation or the receiver optrusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 or on an absorbation with an address.

ent with an address.

NTED NAME OF SIGNING OFFICER OF DIRECTOR