

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northard
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 16 1997 8:00am
Secretary of State

DOCUMENT # P96000078323 (8)

1. Corporation Name

H. AND M. JEWELERS, INC.

Principal Place of Business

2508-D McMULLEN BOOTH ROAD
CLEARWATER FL 34621

Mailing Address

2508-D McMULLEN BOOTH ROAD
CLEARWATER FL 34621-4150



3. Date Incorporated or Qualified

09/19/1996

3a. Date of Last Report

2. Principal Place of Business

21 1196 Overcash Drive

Suite, Apt. #, etc.

22

City & State

23 Dunedin, Florida

Zip

24 34698

Country

25 U.S.A.

2a. Mailing Address

26 1196 Overcash Drive

Suite, Apt. #, etc.

27

City & State

28 Dunedin, Florida

Zip

29 34698

Country

30 U.S.A.

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

FREEMAN, MARTIN G
1196 OVERCASH DRIVE
DUNEDIN FL 34698

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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. I hereby accept the appointment as registered agent I am qualified with, and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the officer or director of the corporation or the registered agent, and if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

12.1 PRES. MARTIN G. FREEMAN
1196 OVERCASH DR.
DUNEDIN FL 34698

TITLE NAME STREET ADDRESS CITY-ST-ZIP

12.2 VP. SEC MARTIN G. FREEMAN
1196 OVERCASH DR.
DUNEDIN FL 34698

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 corporation or the registered agent 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. I changed or began attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)