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

CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100733 (0)

AG JEWELERS SUPPLY CO., INC.

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				4 imminmer tem impra mette motet mater binte batte datte fanon 17100 fift fant	
1145 SAWGRASS CORPORATE PARKWAY 1145 SAWGRASS CORPORATE PARKWAY					
SAWGRASS CORPORATE CENTER SAWGRASS CORPORATE C					
SUNRISE FL 33323 SUNRISE FL 33323					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2 Principal 6	Place of Business	2n Mailing Address			12/13/1996
<u> </u>	lace of business	2a. Mailing Address			4. FEI Number - Applied For
21					65-0716467 Not Applicable
					5. Certificate of Status Desired \$8.75 Additional
22					Fee Required
23 28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country Zip			Countr	v	7,000 10 100
<u>├</u> ──			0		This corporation owes or has paid the current year intentible Personal Property Tax due June 30. Yes Yes
	9. Name and Address of Curren		1		10. Name and Address of New Registered Agent
GC	PRADESKY, ARNOLD		81	Nam	
II .	45 SAWGRASS CORPORATE PK	APV			
1	WGRASSS CORPORATE CENTER		82	Stree	treet Address (P.O. Box Number is Not Acceptable)
i	NRISE FL 33323	1	83		
30	14110L 1 L 33323		"		
}			84	City	ity 85 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 regi					
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Available		da Olalaio	٥.	
SIGNATURE	Signature, typed or printed name of registered age	and little # applicable. (NOTE:	Registered Ag	ent signat	nature required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TITLE		Change Addition
NAME	GORADESKY, ARNOLD		1.2 NAME		
STREET ADDRESS	1145 SAWGRASS CORPORAT	E PARKWAY	1.3 STREE	ADDRES	RESS
CITY-SI-ZIP	SUNRISE FL		1.4 CITY-5	ST-ZIP	,
TITLE	DVP	☐ DELETE	2.1 TITLE		Change Addition
NAME	GORADESKY, PHYLLIS		2.2 NAME		
STREET ADDRESS	1145 SAWGRASS CORPORAT	E PARKWAY	2.3 STREET	ADDRES	HESS
CITY - ST - ZIP	SUNRISE FL		2. 4 CITY-	ST-ZIP	p
TITLE		☐ DELETE	3,1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	KESS .
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	P
TITLE		DELETE	4.1 TITLE		Change Addition
NAME	•		4. 2 NAME		
STREET ADDRESS			4.3 STREET	ADDRESS	16SS
CITY-ST-ZIP			4.4 CITY-S		}
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		_ , _
STREET ADDRESS			5.3 STREET	ADDRESS	NESS !
CITY-ST-ZIP			5.4 GITY - S		
TITLE		DELETE	6.1 TITLE	- 411	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADDRESS	FSS .
CITY-ST-ZIP					
0111-01-4P	and the first terms of the second		6.4 CITY-S	1-412	