PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P97000001736

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90096 043 ***150.00

SANZON	E JEWELERS, INC				
Principal Place	e of Business	Mailing Address			iidi tihii thada ilsin aiss inal
1006 S.R. 574 (MARTIN LUTHER KING BLVD.) 1006 S.R. 574 (MARTIN LUTH SEFFNER FL 33584 SEFFNER FL 33584		THER KING BLVD.)			
			DO NOT WRITE IN THIS S	SPACE	
				3. Date Incorporated or Qualifed	
	•			01/01/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	·	26		59-3420966	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		27		<u> </u>	
City & State		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23) Zip	Country	Zip	Country	8. This corporation owes the current year Inta	
24	25		30		Yes □No
	9. Name and Address of Curren			10. Name and Address of New Registered A	gent
			81 Name		i
	ZONE, GERARD		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	,
	S STATE ROAD 574			<u></u>	<u> </u>
	Martin Luther King BLVD) Fner FL 33584		83	:	
SELI	-NEH FL 33364	·	84 City	*- EI	85 Zip Code
		- 1007 1500 FL 11 O		oration submits this statement for the purpose of	changing its registered
affice or r	registered agent, or both, in the State m familiar with, and accept the obligations.	of Florida. Such change was at	utnorized by the corporation	on's board of directors. I hereby accept the appoin	tment as registered !
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE:	Registered Agent signature required	d when reinstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PD As is a si	(DELETE	1.1 TITLE	* - 7	☐ Change ☐ Addition
NAME	SANZONE, GERARD		1.2 NAME		.`
STREET ADDRESS	1006 STATE ROAD 574		1.3 STREET ADDRESS	•	
CITY-ST-ZIP	SEFFNER FL 33584		1.4 CITY-ST-ZIP		T Observe T Addition
TṛŢLE	VST	☐ DELETE	2.1 TITLE		Change Addition
NAME	SANZONE, ELIZABETH		2.2 NAME	·	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	SEFFNER FL 33584	DELETE	2.4 CITY-ST-ZIP	**	Change Addition
TITLE		☐ DELETE	3.1 TITLE		
NAME			3.2 NAME		}
STREET ADDRESS		<u>؞ ڮٷڛڛڿڛڛۻڹؿڗڿٷۺٷ</u>	3.3 STREET ADDRESS	_	}
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE		Change Addition:
NAME		_	4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	•	\ \ \
CITY-ST-ZIP	· .				
TITLE		•	4.4 CITY-ST-ZIP		
NAME	••	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
		DELETE		En and a Charles	
STREET ADDRESS	A T B COMPANY	DELETE	5.1 TITLE		
STREET ADDRESS CITY-ST-ZIP	A Company of the Comp	☐ DELETE	5.1 TITLE 52 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
-	The Park of the Pa		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		
CITY-ST-ZIP			5.1 TITLE 52 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		

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 amfoal report of suppliemental 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 feceiver 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 changed, by on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE