

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

**FILED**  
**Feb 10 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000061459 (8)**  
 1. Corporation Name  
**PAYLESS JEWELRY #6, INC.**



Principal Place of Business <b>2630 W. BROWARD BLVD.                  FT. LAUDERDALE FL 33312</b>	Mailing Address <b>2690 W. BROWARD BLVD.                  FT. LAUDERDALE FL 33312</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 3029 W. DAVIE BLVD</b> Suite, Apt. #, etc.		2a. Mailing Address <b>26 ←</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>07/16/1997</b>	
22. City & State <b>23 FT. LAUDERDALE, FLORIDA</b>		27. City & State		4. FEI Number <b>65-0404441</b>	
24. Zip <b>33312</b>		25. Country <b>BROWARD</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Fee F	
29. Zip		30. Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> Adr	
9. Name and Address of Current Registered Agent <b>FARBSTEIN, DAVID R                  2785 W. CYPRESS CREEK RD.                  FT. LAUDERDALE FL 33309</b>				10. Name and Address of New Registered Agent	

81. Name		82. Street Address (P.O. Box Number is Not Acceptable)		83.	
84. City		85. Zip Code		FL	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DIMATTINA, ROBERT A.</b>	1.2 NAME	<b>DIMATTINA, ROBERT B</b>
STREET ADDRESS	<b>2690 W. BROWARD BLVD.</b>	1.3 STREET ADDRESS	<b>3029 WEST DAVIE BLVD</b>
CITY-ST-ZIP	<b>FT. LAUDERDALE FL 33312</b>	1.4 CITY-ST-ZIP	<b>FT. LAUDERDALE, FL 33312</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DIMATTINA, ROBERT B</b>	2.2 NAME	
STREET ADDRESS	<b>2690 W. BROWARD BLVD.</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL 33312</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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 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 changed, or on an attachment with an address.

SIGNATURE: *RB Dimattina* **ROBERT B. DIMATTINA** 1/31/98 954584-1633

CR2E034 (10/97)