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

PROFIT CORPORATION **ANNUAL REPORT**

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000076135 (7)

ROZ JEWELERS, INC.

Principal Place of Business

6259 8. NORCROSS TUCKER RD., S-1

Mailing Address

6259 S. NORCROSS TUCKER RD., S-1

FILED May 12 1998 8:00am Secretary of State



TUCKER GA 30084 TUCKER GA 30084 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/03/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59-3463893 1500 Crov Square Mall 26 21 Not Applicable Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Name and Address of Current Registered Agent 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent FEROZALI LALANI 1500 GOVERNERS SQUARE MALL 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHSSEE FL 30136 **B3** 84 City 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 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) Signature, Typoshor printed name of registered agent and title it apple able 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELFTE Change Addition TITLE 1.1 TILLE LALANI, FEROZALI J NAME 1.2 NAME 6259 S. NORCROSS TUCKER RD., S-1 STREET ADDRESS 1.3 STREET ADDRESS **TUCKER GA 30084** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 211016 Change Addition NAME HUSSAIN, BARKAT A 2.2 NAME 6259 S. NORCROSS TUCKER RD., S-1 STREET ADDRESS 2.3 STREET ADDRESS TUCKER GA 30084 CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP Change TITLE 3.1 TITLE Addition ATTAWALA, NOORALLAH S NAME 3.2 NAME 6259 S. NORCROSS TUCKER RD., S-1 STREET ADDRESS 3 3 STREET ADDRESS PIEASE !. **TUCKER GA 30084** CITY-ST-ZIP 3.4. CHY-S1-ZIP TITLE DELFTE 4.1 HTCE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHY-S1-7IP CITY-ST-ZIP ☐ DELETE Change TITLE 5.1 TITLE Addition NAME 52 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-7IP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY - \$1 - 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 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 chapted, or on an attachment with an address.