SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

P98000081125

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 NOV 23 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000081125

1. Corporate Name
J.S. Design by Rina Mink, Inc.

Principal Place of Business
420 LINCOLN RD
7th FLOOR
MIAMI BEACH, FL 33139

Mailing Address
420 LINCOLN RD
7th FLOOR
MIAMI BEACH, FL
33139

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 540 W 37th STREET
Suite, Apt. #, etc
22
City & State
23 MIAMI BEACH, FL
Zip
24 33140
Country
25 USA

2a. Mailing Address
26 540 W 37th STREET
Suite, Apt. #, etc
27
City & State
28 MIAMI BEACH, FL
Zip
29 33140
Country
30 USA

3. Date Incorporated or Qualified
SEP 18, 1998

4. FEI Number
65-0865203
☐ 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 owes the current year Intangible Personal Property. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST., STE. 1
TALLAHASSEE, FL 32301

10. Name and Address of New Registered Agent
81 Name WILHELM A. STEIN
82 Street Address (P.O. Box Number is Not Acceptable) 540 W 37th STREET
83
84 City MIAMI BEACH FL 85 Zip Code 33140

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 W.A. Stein WILHELM A. STEIN, PRESIDENT NOV 22 - 1999
(Signature of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12 OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PRESIDENT NAME WILHELM A. STEIN STREET ADDRESS 540 W 37th Street CITY-ST MIAMI BEACH, FL 33140	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VICE-PRESIDENT NAME RINA MINKOVITZ STREET ADDRESS 540 W 37th STREET CITY-ST MIAMI BEACH, FL 33140	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition S99115904054--9 -04/22/99--90131--004 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition YB 12/2/99
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (5/99)

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: W.A. Stein WILHELM A. STEIN NOV 22-99 305-674-1272
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #