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Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90147 013 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P98000100221

1. Corporation Name

DAMASSO'S JEWELS & WATCHES, INC.



Principal Place of Business

Mailing Address

~~44 MADEIRA AVENUE~~
~~SUITE #2~~
~~CORAL GABLES FL 33134~~

~~44 MADEIRA AVENUE~~
~~SUITE #2~~
~~CORAL GABLES FL 33134~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/02/1998

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

7891 W. FLAGLER ST.

7891 W. FLAGLER ST.

4. FEI Number

66-0878396

Suite, Apt. #, etc.

Suite, Apt. #, etc.

133

133

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

City & State

City & State

MIAMI, FLORIDA

MIAMI, FLORIDA

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

Zip

Country

33144

USA

Zip

Country

33144

USA

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ULLOA, DALIAN

~~44 MADEIRA AVENUE~~

~~SUITE #2~~

~~CORAL GABLES FL 33134~~

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

7891 W. FLAGLER ST.

SUITE #133

84. City

MIAMI

FL

85. Zip Code

33144

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02/22/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **44 MADEIRA AVENUE, SUITE #2**

CITY-ST-ZIP **CORAL GABLES FL 33134**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

7891 W. FLAGLER ST., STE 133

MIAMI, FLORIDA 33144

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 of the incorporator 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 to this report, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/22/99 (305) 772-7624

CR2E034 (11/98)