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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S10171

(4)

FILED
Feb 03 1998 8:00am
Secretary of State

ARGENTI DESIGNER JEWELERS, INC.				A IRRUPATE AND COME AND	
Principal Plac	e of Business	Mailing Address		- + 1001(E10 (E1 170))	ANDIA BUNUN DIDIK DEBIK DIDAR RODA
FASHION MALL AT PLANTATION		FASHION MALL AT PLANTATION			
321 N. UNIVERSITY DR. #B-12A		321 N. UNIVERSITY DR. #B-12A			
PLANTATION FL \$3324		PLANTATION FL 33324		DO NOT WRITE IN TH	IIS SPACE
·				3. Date Incorporated or Qualified	
2 Principal P	lace of Business	2a. Mailing Address		01/01/1991 4. FEI Number	
21	rady of Eddiness	26		4. FEI NOIDE	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		26		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29 3	0	Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curren	t Registered Agent		10. Name and Address of New Register	ed Agent
	VER, MARK STEVEN		81 Name		
2100 SOUTH OCEAN DRIVE			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
но	LLYWOOD FL 33019		83		
			63		
			84 City		85 Zip Code
44 Purguant	to the provinces of Costion 607.060	2 and CO7 1509 Flyrida Clat.tho	the sharp named core	_	L as zip code
office or r	egistered agent or both in the State.	of Florida, Such change was suf	thorized by the cornoration	oration submits this statement for the purposi on's board of directors. I hereby accept the a	appointment as registered
agent. i a	m familiar with, and accept the obliga	ations of Section 607.0505, Florid	da Statutes.		
SIGNATURE	Signature, typod or printed name of registered ager	nt and title it applicable (NOTE: I	Registered Agent signature require	d when reinstating) DAT	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	<u></u>
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	S ILVER, MARK STEVEN		12 NAME		
STREET ADDRESS	2100 SOUTH OCEAN DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33019		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	NEIBERG, RENEE		2.2 NAME		
STREET ADDRESS	3745 NE 171 ST #28		2.3 STREET ADDRESS		
CITY-ST-ZIP	N MIAMI BEACH FL 33160		2.4 CITY-ST-ZIP		
TITLE	·	☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
		[] ottett			Change Mudition
NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS		İ
CITY-ST-ZIP		Į			
TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS	/		6.3-STREET ADDRESS:	- A	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	1 A	
	ertity that the information supplier wil	th this filing does not qualify for t		Section 119.07(3)(i), Florida Statutes, Lfurther	certify that the information

It repetly certify that the Information supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic that I am an including an unit of the comporation 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 or changed, or only in attachment with an address.

CIONATURE.

9 Gry 424770