FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** S22128 (0)A-1 WATCHES CORP. Principal Place of Business Malino Address 223 E FLAGLER ST 223 E FLAGLER ST 4TH FL 4TH FL MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualified 3a. Date of Last Report 01/02/1991 09/29/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0296827 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required Orty & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trast Fund Contribution Added to Fees Zφ Country Zio 8. This corporation has liability for intangible tax under s. 199 032, 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MYSOREWALA, M ANWER 82 Street Address (P.O. Box Number is Not Acceptable) 223 E FLAGLER ST 4TH FL 83 **MIAMI FL 33131** 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. Thereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signative ityped or printed name of respiles and algorithms of application (NCIT) Projectional Agent's greature required when remotatings. OFFICERS AND DIRECTORS ADD TIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1 1 TITLE Addition Change AHMED, MOHAMMED FARIO 1.2 NAM5 223 E FLAGLER 4TH FL STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL Dity-S1-ZiP NAICHTY ST. ZIP DST ☐ DELETE 2.1 1/11[Change Addition MYSOREWALA, M ANWER 2.2 NAME STREET ADDRESS 223 E FLAGLER ST 4TH FL 2.3 STREET ADDRESS CHY-ST-ZIP MIAMI FL 2.4 <u>CITY - ST - ZIP</u> □ DELETE 3.1 TH: F Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - \$1 - 7IP DELETE 4 1 Tr'LE Change Addition

CITY-ST-ZIP 64 CHY ST-ZiP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes - Further certify that the information priceated 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 early that I am an officer to director of the corporation of the receiver or furstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cycings I, or on an attainment with an address.

4.2 NAME

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SIGNATURE:

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STREET ADDRESS

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ DELETE

DELETE

4.30.96

305 373 5118

Change

Change

☐ Addition

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CR2E034 (12/95)