## 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 # S46832 (9)BAE JEWELERS, INC. Principal Place of Business Mating Address 11833 S.W. 103RD LANE 11833 S.W. 103RD LANE MIAM! FL 33186 MIAMI FL 33186 3. Date incorporated or Qualified 3a. Date of Last Report 04/22/1991 05/01/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0257970 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country his corporation has liability for intangible tax under s 199 032. 24 25 29 🗶 Yes 🗌 No 30 Flooda Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo MARTINEZ, DANIEL E. Street Address (P.O. Box Number is Not Acceptable) 82 11833 S.W. 103RD LANE MIAMI FL 33188 R3 84 11. Pursuant to the previsions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both of the State of Florida Such changing was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am tarmitar with, and accept the appointment as registered agent, I am SIGNATURE 12. OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE [] DELETE PD 1 1 HTUF Change Addit on NAME MARTINEZ, DANIEL E. 1.2 NAME NH STREET ADDRESS 11833 S.W. 103RD LANE 1.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 1.4 Cify - \$1 - 26-TITLE DELETE 2 1 THLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS CITY - ST - ZIP 24 OITY - \$1 - Z.P TITLE DELF IE 3 1 Table Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY - ST - ZIP 3.4 CITY - S1 - ZIP TITLE DEL ETE 4 1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST ZIP 4.4 CITY - ST ZIF TITLE DELETE 5 1 TOLE 4000018833**64**\* Addition 5.2 NAME -07/03/96--01051--004 STREET ADDRESS 5.3 STREE! ADDRESS \*\*\*200.00 CHTY - ST - ZIP 5.4 CHY+S\*-7 P TITLE DELFIE 6 1 T I LF ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CHY ST-ZIP

SIGNATURE: V

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

or on an attachment with an address

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