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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S48413**

1. Corporation Name

PALM BEACH JEWELERS, INC.

Principal Place	of Business	Mailing Address			MYM31 MIMIT MIMIT MEM31 MIS	
2528 PGA BLVI		2528 PGA BLVD		,		
	SARDENS FL 33410	PALM BEACH GARDENS FL	33410	· .		
US US		US		DO NOT WRITE IN THIS SPACE		
[3. Date Incorporated or Qualifed 04/25/1991		
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number	Арр	ied For
21		26		65-0255526		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Ad	
22		27			Fee Req	
City & State	e	City & State		6. Election Campaign Financing	\$5.00 N	
23		28		Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current ye		⊒No I
24	25		30	Personal Property Tax. 10. Name and Address of New Regist		
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Regis	tered Agent	
BRO	WN, WARREN			ROWN, WARREN		
	WOODRUFF LN		82 Street Add	dress (P.O. Box Number is Not Acceptable)		
* * * * *	M BEACH GARDENS FL 33418		83	528 PGA 67VD		
TAL	W DENOTE GATIOCITE GOTTO		83			ĺ
			84 City	3 . / 100 . 1	FI 85 Zip Co	ode
			PALM	BEACH GARDENS		
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes of Florida, Such change was au	s, the above-named cor thorized by the corporal	rporation submits this statement for the purportion's board of directors. I hereby accept the	appointment as regi	stered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flori	da Statutes.	,	-	
SIGNATURE						
	Signature, typed or printed name of registered age		Registered Agent signature requi		ATE AND DIRECTOR	DC IN 12
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	Change	Addition
TITLE	D COMPLEMANDEN	C. Dette le		BROWN, WARREN	A 9-	
NAME	BROWN, WARREN		1.2 NAME	2528 PEA BLUD		
STREET ADDRESS	5110-WOODRUFF LN		وسيا	PALH REACH GAPBENS	E1 33(1)	a
CITY-ST-ZIP	PALM-BOH-GARDENG-FL	☐ DELETE	1.4 CITY-ST-ZIP	THEM BEACH GIRBERG		
TITLE		□ SECETE			I I Change	
NAME.			2.2 NAME		☐ Change	Addition
STREET ADDRESS					[_] Change	
CITY-ST-ZIP			2.3 STREET ADDRESS		[_] Change	
TITLE		C DELETE	2.4 CITY-ST-ZIP			Addition
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		☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS			Addition
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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 five 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

861-625-4000