Amended

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**PROFIT CORPORATION ANNUAL REPORT**
**1999**

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

**DOCUMENT # S55986**

1. Corporation Name
COSTUME JEWELRY WHOLESALERS, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 238 SW 12TH AVE<br>DEERFIELD BEACH FL 33442<br>US | 238 SW 12TH AVE.<br>DEERFIELD BEACH FL 33442<br>US |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/28/1991

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24) Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29) Country (30)

4. FEI Number: 65-0273004 ☐ Applied For ☐ Not Applicable

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

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

7. 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 |
|---|---|
| ROSE, HELEN<br>2711 CONGRESSIONAL WAY<br>DEERFIELD BEACH FL 33074 | 81 Name: Steven Schwartz<br>82 Street Address (P.O. Box Number is Not Acceptable): 238 SW 12Th Ave<br>83: Deerfield Beach<br>84 City: FL 85 Zip Code: 33442 |

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: Steven Schwartz (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE: 1/18/99

| 12. OFFICERS AND DIRECTORS | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 11 TITLE: Pres. President<br>12 NAME: Steven Schwartz<br>13 STREET ADDRESS: 238 SW 12Th Ave<br>14 CITY-ST-ZIP: Deerfield Beach, FL. 33442 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE | 21 TITLE: VP Vice President<br>22 NAME: Linda Schwartz<br>23 STREET ADDRESS: 238 SW 12Th Ave<br>24 CITY-ST-ZIP: Deerfield Beach, FL. 33442 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE | 31 TITLE: Secretary Helen Rose<br>32 NAME<br>33 STREET ADDRESS: 238 SW 12Th Ave<br>34 CITY-ST-ZIP: Deerfield Beach, FL. 33442 ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE | 41 TITLE<br>42 NAME<br>43 STREET ADDRESS<br>44 CITY-ST-ZIP ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE | 51 TITLE<br>52 NAME<br>53 STREET ADDRESS<br>54 CITY-ST-ZIP ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP ☐ DELETE | 61 TITLE<br>62 NAME<br>63 STREET ADDRESS<br>64 CITY-ST-ZIP ☐ Change ☐ 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 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 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 attached sheet, with all other like empowered.

**SIGNATURE:** Steven Schwartz 1/18/99 9544229959 7/20/99

(Name of Signing Officer or Director) (Date) (Daytime Phone #)