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

BRIG

FILED

PROFIT CORPORATION



FLORIDA DEPARTMENT OF TATE

Mar 30 1998 8:00am

| | 1998 | | 7 | ary of State CORPORATIONS | Secretary | of State |
|--|---|------------------------|--|--|--|-----------------------------------|
| JOSEP Principal Place | e of Business | V28875 Le Jewelry (| Mailing Address | | | |
| 5535 SE FED HWY STUART FL 34997 US | | | 5555 S.E. FEDERAL HIGHWAY STUART FL 34997 | | DO NOT WRITE IN THIS | PDACE |
| | | | | | 3. Date Incorporated or Qualified 04/13/1992 | SFACE |
| 2. Principal P | lace of Business | | 2a. Mailing Address | | 4. FEI Number 65-0333420 | Applied For Not Applicable |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | ······ | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | 9 | | City & State | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be |
| Zip | — <u> </u> | untry | Z ip | Country | 8. This corporation owes or has paid the cu | |
| 24 | 9. Name and A | Idress of Current R | 29 egistered Agent | 30 | Personal Property Tax due June 30. 10. Name and Address of W Registered | Agent No |
| 879 TAI | Y, DAVID R. 95 W. MCNAB RO MARAC FL 33321 | | | 84 Ci | rdress (P.O. Box Number is Not Acceptable) | |
| 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 Signature, typical or printing name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | |
| 12, | Signature, typed or printed | OFFICERS AND D | | TE: Registered Agent signature required: | uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN | D DIRECTORS IN 12 |
| TITLE | P | | ☐ DEL e te | 1.1 TITLE | | Change Addition |
| NAME STREET ADDRESS | NAPOLI, JOSE 5555 S.E. FED STUART FL | | | 1.2 NAME 1.3 STREET ADDRESS | , | |
| CFTY-ST-ZIP TITLE | | | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | | Change Addition |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST- ZIP | | |
| TITLE NAME | · 115 | | ☐ DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | | Change Addition |
| STREET ADDRESS City-St-Zip | | | | 3.4. CITY-ST-ZIP | | 1 |
| TITLE | | | DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | | 4.2 NAME | | |
| STREET ADDRESS | | | | 4.3 STREET ADDRESS | | [|
| CITY-ST-ZIP 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 TITLE | | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | • | | | 6.2 NAME | | |
| STREET ADDRESS | | | | 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP | | ļ |
| CITY-ST-ZIP | artifu that the inform | alion cumpled with t | his filing door not qualify | | n Section 119 07(3)(i) Florida Statutes I further o | ertify that the information |

mereby certify mat the information supplied with first the information indicated on this annual report or suppliemental 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changon, or on an attachment with an address.

SIGNATURE.

3-12.08

561-221-1779