FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State OF CORPORATIONS **1996**5-1 90 **DOCUMENT #** THE HAMILTON CO., JEWELERS Mailing Address Principal Place of Business 2542 BRUNSWICK PIKE 2542 BRUNSWICK PIKE LAWRENCEVILLE NJ 08648 LAWRENCEVILLE NJ 08648 3a. Date of Last Report 3. Date Incorporated or Qualified 03/21/1995 05/23/1990 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 21-0469628 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be Crty & State Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s 199.032, Zip Country Zio Florida Statutes Yes □ No 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent B1 Name SIEGEL, MARTIN Street Address (P.O. Box Number is Not Acceptable) 82 SAME 13767 LE BATEAU LANE PALM BEACH GARDENS FL 33410 Zip Code 84 City 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. DATE INOTE. Registered Agent's gnature required when reinstating: Signature, typed or printed name of registerest agent as dittield approaching CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1. 1 TITLE TITLE SIEGEL, HANK 1.2 NAME NAME 245 PROSPECT 1.3 STREET ADORESS STREET ADDRESS PRINCETON NJ 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition CEO □ DELETE 2 1 TIFLE TITLE SIEGEL, MARTIN 22 NAME NAME 13767 LE BATEAU LANE 2.3 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 2 4 CITY - ST - ZIP CITY - ST - ZIP ☐ Change Addition DELETE 3. 1 TITLE TITLE SIEGEL, DENISE NAME 3.2 NAME 231 BROOKS BEND **33 STREET ADDRESS** STREET ADDRESS PRINCETON NJ 3 4 CITY - \$1 - ZIP CITY - ST - ZIP Change ☐ Addition DELETE 4 1 THILE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ■ Addition 5 1 TITLE TITLE NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-SI-ZIP Change ☐ Addition DELETE 6 1 TITLE TITLE 62 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 6 A CITY - ST - 2IP CITY - ST - ZIP 14. Ido 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. 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 cath; that I am an officer or director of the consoration or the receiver or true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with my oddress. appears in Block 12 or Block 13 if change SIGNATURE: Daytime Phone # OFFICER OR DIRECTOR