

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0015262
AT

03 JAN 22 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **A02000001282**



1. Entity Name
GEM INVESTMENTS, LTD.

Principal Place of Business
**8780 S.W. 100TH STREET
MIAMI FL 33176**

Mailing Address
**P.O. BOX 110477
NAPLES FL 34008**



2. Principal Place of Business
4986 VENTURA CT.

3. Mailing Address
P.O. BOX 110477

Suite, Apt. #, etc.
NAPLES, FL

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
NAPLES, FL

4. FEI Number
74-3063371

Applied For
Not Applicable

Zip
34109 Country
USA

Zip
34108 Country
USA

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**OWEN, JACK B JR.
4500 PGA BOULEVARD, SUITE 206
PALM BEACH GARDENS FL 33418**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. **\$1,500,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$1,500,000.00**

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **M03668**
NAME **ELECTRITECH, INC.**
STREET ADDRESS **8780 S.W. 100TH STREET**
CITY-ST-ZIP **MIAMI FL 33176**

STREET ADDRESS **4986 VENTURA CT.**
CITY-ST-ZIP **NAPLES, FL 34109**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP **700010409177**
01/22/03--01027--012 **526.25

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/9/03, 239-596-2604
Date Daytime Phone #

CR2E003 (10/02)