

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000014448

**FILED**  
**Jan 23, 2007**  
**Secretary of State**

**Entity Name:** GEM SYSTEMS, LLC

**Current Principal Place of Business:**

3413 SW 14TH ST.  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

12469 N.W. 44TH STREET  
CORAL SPRINGS, FL 330065

**Current Mailing Address:**

3413 SW 14TH ST.  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

12469 N.W. 44TH STREET  
CORAL SPRINGS, FL 33065

FEI Number: 56-2351687

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARINELLI, JAMES  
3413 SW 14TH ST.  
DEERFIELD BEACH, FL 33442 US

**Name and Address of New Registered Agent:**

MARINELLI, JAMES  
12469 N.W. 44TH STREET  
CORAL SPRINGS, FL 33065 US

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.

SIGNATURE:

01/23/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MARINELLI, JAMES A PRES  
Address: 3413 SW 14TH ST  
City-St-Zip: DEERFIELD BEACH, FL 33442

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MARINELLI, JAMES A PRES  
Address: 12469 N.W. 44TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES A. MARINELLI

PRES

01/23/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date