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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000068031 (1)

GEM CONSTRUCTION CO.

| Principal Place of Business | Mailing Address | is the bridge and about and is about marks an |
|---|--|---|
| 12540 VIRTUDES ST. CORAL GABLES FL 33156 | 12540 VIRTUDES ST. CORAL GABLES FL 33156-6348 | |
| | | 3. Date Incorporated or Qualified 09/15/1994 |
| Principal Place of Business 1 | 2a. Mailing Address 26 | 4. FEI Number 65-0523902 |
| | | |

FILED May 08 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

Not Applicable

06/13/1996

| Suite, Apt | #, etc. | Suite, Apt #, etc. | ************************************** | 5. Certificate of Status Desired | 38.75 A | |
|---|---|---------------------|---|---|---|------------------|
| City & Sta | ile | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 Added to | |
| Zip | Country 25 | Zip 29 | Gountry 30 | 8. This corporation has liability for intal | ngible tax under s. as \[\int \text{No} \] | 199.032, |
| | 9. Name and Address of Curre | nt Registered Agent | | 10. Name and Address of New Regist | ered Agent | |
| ESI | PINOSA, GLORIA | | 81 Name | | | |
| | 540 VIRTUDES ST. | | 82 Street Ad | idress (P.O. Box Number is Not Acceptable) | | |
| | RAL GABLES FL 33156 | | | , | | |
| | | | .83 | | | |
| | | | 84 City | | 85 Zip (| |
| | | | City | | FL 85 Zip C | 700 0 |
| agent Ta SIGNATURE | arn familiar with, and accept the oblig | | rida Statutes. Registered Agent signature re- | ration's board of directors. I hereby accept the | MTE | |
| 12. | OFFICERS AF | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICER | S AND DIRECTOR | S IN 12 |
| HILE | PD | DELETE | 1.1 TITLE | | Change | Additio |
| 141/16 | DEBESA, JOSE | | 1.2 NAME | | | |
| JIFELT ADDRESS | (| | 1.3 STREET ADDRESS | | | |
| OH t - ST - ZIP | CORAL GABLES FL 33156 | | 1.4 CITY-ST-ZIP | | | |
| HILE | STD | DELETE | 2.1 TITLE | | Change | Additio |
| AME | ESPINOSA, GLORIA | | 2.2 NAME | | | |
| THEFT ACCORESS | | | 2.3 STREET ADDRESS | | | |
| 114 - \$1 - 715 | CORAL GABLES FL 33156 | | 2.4 CITY-ST-ZIP | · · | | |
| ILF | | DELETE | 31 TITLE | | Change | Additi |
| IANE | | | 3.2 NAME | | | |
| JIBEET ADORESS | | | 3.3 STREET ADDRESS | | | |
| 711 ST-712 | | | 34. City-St-ZiP | | | |
| ITLE | | DELETE | 4.1 TITLE | | Change | Additio |
| V4 V č | | | 1 | | | |
| STREET ADDRESS. | | | 4. 2 NAME | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.3 STREET ADDRESS | | | 174.00 |
| CITY-ST-7IP TITLE | | DELETE | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE | | Change | Addition |
| CITY-ST-ZIP TITLE NAME | | DELETE | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5 1 TITLE 5 2 NAME | · · · · · · · · · · · · · · · · · · · | Change | Addition |
| CITY-ST-ZIP TUTLE NAME STRÉET ADDINESS | | DELETE | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | · · · · · · · · · · · · · · · · · · · | Change | Additio |
| OITY-ST-ZIP TITLE NAME STREET ADDITIESS OITY-ST-ZIP | | | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | | | |
| CITY-ST-709 TUTLE MAME STREET ADDRESS CHT-ST-709 TUTLE | | ☐ DELETE | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | | Change | Additio |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME | | | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME | | | |
| CITY-ST-ZIP DITLE NAME STREET ADDRESS CHT-ST-ZIP DITLE | | | 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE | | | |

Too infectory centry that the anormation supplied wan this hing does not quality for the exemption stated in Section 119.07(3)(), Florida statutes. Trunter 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 Co poration 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 attachment with an address.