I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIA ELVIRA GONZALEZ

Electronic Signature of Signing Officer/Director Detail

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0100060834

Entity Name: GEM INSURANCE BUSINESS OFFICE, CORP.

Current Principal Place of Business:

7911 NW 72 AVE - SUITE 102B MEDLEY, FL 33166

Current Mailing Address:

7911 NW 72 AVE - SUITE 102B MEDLEY. FL 33166

FEI Number: 65-1114099

Name and Address of Current Registered Agent:

GONZALEZ, MARIA E 762 NW 32 PL MIAMI, FL 33125 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	V	Title	PT
Name	MONTANEZ, MARGARITA	Name	GONZALEZ, MARIA ELVIRA
Address	762 NW 32 PL	Address	762 NW 32 PL
City-State-Zip:	MIAMI FL 33125	City-State-Zip:	MIAMI FL 33125

PRESIDENT

02/28/2013

FILED Feb 28, 2013 Secretary of State CC8508479619

Date

Certificate of Status Desired: No

Date