

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 495401

Entity Name: GEM CUTTING CO., INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

36 N.E. 1ST ST.
1048
MIAMI, FL 33131

New Principal Place of Business:

36 N.E. 1ST ST.
1048
MIAMI, FL 33132

Current Mailing Address:

36 N.E. 1ST ST.
1048
MIAMI, FL 33131

New Mailing Address:

36 N.E. 1ST ST.
1048
MIAMI, FL 33132LIS

FEI Number: 59-1670656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARED, LISA
1400 SALZEDO #504
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: PEKAR, GILBERT T
Address: 36 N.E. 1 STREET. #1048
City-St-Zip: MIAMI, FL 33132

Title: S () Delete
Name: CASTILLO, ELSA
Address: 36 N.E. 1 ST. #1048
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CASTILLA, ELSA
Address: 36 N.E. 1 ST. #1048
City-St-Zip: MIAMI, FL 33132

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 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 an address, with all other like empowered.

SIGNATURE: GILBERT T PEKAR

PRES

01/05/2007

Electronic Signature of Signing Officer or Director

Date