SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **574883** **(5)**

1. Corporation Name

GEM INDUSTRIES, INC.

Principal Place of Business
5030 HIATUS ROAD
SUNRISE FL 33351

Mailing Address
5030 HIATUS ROAD
SUNRISE FL 33351

3. Date Incorporated or Qualified: 06/07/1978
3a. Date of Last Report: 06/26/1995

2. Principal Place of Business
21 7675 GRANVILLE DR
Suite, Apt #, etc
22
City & State
23 TAMARAC, FL
Zip
24 33321
Country
25 USA

2a. Mailing Address
26 7675 GRANVILLE DR.
Suite, Apt #, etc
27
City & State
28 TAMARAC, FL
Zip
29 33321
Country
30 USA

4. FEI Number: 22-1856946 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

BIEDERMAN, IRVING
2163 BAY CT
FT LAUDERDALE FL 33326

10. Name and Address of New Registered Agent

61 Name: BIEDERMAN, IRVING
62 Street Address (P.O. Box Number is Not Acceptable): 7675 GRANVILLE DR
63 TAMARAC
64 City: TAMARAC FL 85 Zip Code: 33321

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	CEO	☐ DELETE
NAME	BIEDERMAN, IRVING	
STREET ADDRESS	2163 BAY CT	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	VD	☑ DELETE
NAME	BIEDERMAN,RICHARD	
STREET ADDRESS	4340 NW 103 TERRACE	
CITY-ST-ZIP	SUNRISE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	CEO, PRES, V.P. SEC.	☑ Change ☐ Addition
1.2 NAME	BIEDERMAN, IRVING	
1.3 STREET ADDRESS	7675 GRANVILLE DR	
1.4 CITY-ST-ZIP	TAMARAC FL 33321	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Irving Biederman JUNE 18, 1996 954-720-4560
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Day Phone #
IRVING BIEDERMAN

CR2E034 (3/96)