


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

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 583406		
1. Corporation Name GEMEAR, INC.		

FILED
99 JUL 27 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
5901 S.W. 74TH STREET MIAMI, FLA.	

2. Principal Place of Business	2a. Mailing Address
21. SAME	26. same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22. 400	27. City & State
City & State	28. City & State
23. MIAMI, FL	29. Zip
Zip	Country
24. 33143	30. USA

DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified	1978
4. FEI Number	None
Applied For	<input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Trust Fund Contribution	<input type="checkbox"/>
8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
JAMES MOLANS, ESQ. 5901 S.W. 74TH ST. MIAMI, FL 33143 Suite 400

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL
85. Zip Code

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 JAMES MOLANS, Esq. (NOTE: Registered Agent signature required when reinstating) JUNE 29, 1999

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11. TITLE	12. NAME
1. MELVYN KESSLER, PRES	5901 S.W. 74TH ST.	13. STREET ADDRESS	14. CITY-ST-ZIP
MIAMI, FL. 33143		21. TITLE	22. NAME
		23. STREET ADDRESS	24. CITY-ST-ZIP
2. HAL KESSLER v/p	5901 S.W. 74TH ST.	31. TITLE	32. NAME
MIAMI, FLA. 33143		33. STREET ADDRESS	34. CITY-ST-ZIP
		41. TITLE	42. NAME
		43. STREET ADDRESS	44. CITY-ST-ZIP
		51. TITLE	52. NAME
		53. STREET ADDRESS	54. CITY-ST-ZIP
		61. TITLE	62. NAME
		63. STREET ADDRESS	64. CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Melvyn Kessler 6/29/99 205-593-0731
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (11/98)

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re: Annual Report for Gemear, Inc.

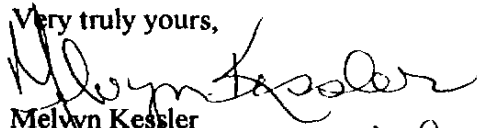
Dear Sir/Madam

I am enclosing the filing fee in the amount of \$150.00 for the 1999 annual report for the above named corporation.

Please accept my apology for the late filing, however, somewhere along the way, either myself or my attorney and resident agent goofed up. I believe Mr. Molans sent me the form and I misplaced it and therefore had to request a new form. After 20 plus years, not too bad.

Thanking you in advance, I remain,

Very truly yours,


Melvyn Kessler

2801 W. Orchard Circle
Davie, Fla. 33328