

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

FILED
Jan 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # J10595 (3)
1. Corporation Name
GEM SECURITY, INCORPORATED

Principal Place of Business

Mailing Address

720 E FLETCHER #20
TAMPA FL 33612
US

720 E FLETCHER #203
TAMPA FL 33612
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1986

4. FEI Number

59-2612563

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

☒ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 720 E. Fletcher #203

Suite, Apt. #, etc.

22

City & State

23 Tampa, Fla.

24 Zip

33612

Country

25 USA

2a. Mailing Address

26 same

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MORRIS, PAULA
2709 CEDARIDGE DR
TAMPA FL 33618

81 Name

PAULA MORRIS

82 Street Address (P.O. Box Number is Not Acceptable)

16650 Valley Dr

(new home address)

83

84 City

Tampa, Fla.

FL

85 Zip Code

33618

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

(NOT Required Agent signature required when renewing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
MORRIS, PAULA E.
2709 CEDARIDGE DR.
TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MORRIS, JERALD G.
2709 CEDARIDGE DR.
TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

MORRIS, Paula E.
720 E. Fletcher Ave #203
TAMPA, FLA. 33612

☒ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

MORRIS, Jerald G.
720 E. Fletcher Ave #203
TAMPA, FL. 33612

☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

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 or on an attachment with an address.

Paula Morris

1-7-98 83-2612563

CR2E034 (10/97)