

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **K74430** (5)

1. Corporation Name

GEMS OF DELRAY, INC.



Principal Place of Business

**2307 DOUGLAS RD 4 FLR
SUITE 400
MIAMI FL 33145
US**

Mailing Address

**2307 DOUGLAS RD 4 FLOOR
SUITE 400
MIAMI FL 33145
US**

3. Date Incorporated or Qualified
03/22/1989

3a. Date of Last Report
03/22/1995

2. Principal Place of Business

21 **2307 Douglas Rd.**

Suite, Apt. #, etc.

22 **Suite # 500**

City & State

23 **Miami, Florida**

Zip

24 **33145**

Country

25 **U.S.A.**

2a. Mailing Address

26 **2307 Douglas Rd.**

Suite, Apt. #, etc.

27 **Suite # 500**

City & State

28 **Miami, Florida**

Zip

29 **33145**

Country

30 **U.S.A.**

4. FEI Number

65-0119120

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

10. Name and Address of New Registered Agent

**INTERNATIONAL SUNSHINE CO. INC
2307 DOUGLAS RD
SUITE 400
MIAMI FL 33145**

81 Name **INTERNATIONAL SUNSHINE CO. INC.**

82 Street Address (P.O. Box Number is Not Acceptable)
2307 DOUGLAS RD.

83 **SUITE # 500**

84 City **MIAMI, FLORIDA**

FL

85 Zip Code
33145

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 607.0503, Florida Statutes.

SIGNATURE **Wilson J. Alayo**

President -

4-20-96

Signature typed or printed and designated as the registered agent.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **DP GOLDFARB, WILLIAM**
STREET ADDRESS **2307 DOUGLAS RD #400**
CITY-ST-ZIP **MIAMI FL**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **DP GOLDFARB, WILLIAM**
1.3 STREET ADDRESS **2307 DOUGLAS RD. # 500**
1.4 CITY-ST-ZIP **MIAMI, FL.**

TITLE ☐ DELETE
NAME **DVS ALAYO, WILSON**
STREET ADDRESS **2307 DOUGLAS RD #400**
CITY-ST-ZIP **MIAMI FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **DVS ALAYO, WILSON**
2.3 STREET ADDRESS **2307 DOUGLAS RD. #500**
2.4 CITY-ST-ZIP **MIAMI, FLORIDA**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: **Wilson J. Alayo** Vice President -

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Doc#

Doc/line Photo#

CR2E034 (12/95)