

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

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90077 018 ***150.00

DOCUMENT # K91517

1. Corporation Name

STEMA CORPORATION

Principal Place of Business

STEPHEN A. FREEMAN
520 BRICKELL KEY DR STE. 305
MIAMI FL 33131-2608

Mailing Address

STEPHEN A. FREEMAN
520 BRICKELL KEY DR STE. 305
MIAMI FL 33131-2608

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

05/30/1989

4. FEI Number

65-0124407

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 owes the current year intangible
Personal Property Tax.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREEMAN, STEPHEN A.
520 BRICKELL KEY DRIVE
STE. 305
MIAMI FL 33131

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

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 PD ☐ DELETE
NAME LANDSBERG, PEDRO G.
STREET ADDRESS 1740 NW 94TH AVE
CITY-ST-ZIP MIAMI FL

TITLE VPS ☒ DELETE
NAME LANDSBERG, TAMARA B.
STREET ADDRESS 1740 NW 94TH AVE
CITY-ST-ZIP MIAMI FL

TITLE S ☐ DELETE
NAME FREEMAN, STEPHEN A.
STREET ADDRESS 520 BRICKELL KEY DR. 305
CITY-ST-ZIP MIAMI FL

TITLE VP ☐ DELETE
NAME LANDSBERG, GABRIEL B.
STREET ADDRESS 1740 NW 94TH AVE
CITY-ST-ZIP MIAMI FL

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 PD ☒ Change ☐ Addition
1.2 NAME Landsberg, Pedro G.
1.3 STREET ADDRESS 10838 N.W. 27 Street
1.4 CITY-ST-ZIP Miami, FL 33172

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 VP ☒ Change ☐ Addition
4.2 NAME Landsberg, Gabriel B.
4.3 STREET ADDRESS 10838 N.W. 27 Street
4.4 CITY-ST-ZIP Miami, FL 33172

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen A. Freeman

4/28/99

(305) 374-3800

Date

Daytime Phone #

CR2E034 (11/98)