2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P000000161401. Entity Name

1. Entity Name
THE GEMSTONE FACTORY, INC.



FILED Apr 21, 2008 08:00 A Secretary of State

Principal Place of Business

8231 W ATLANTIC BLVD CORAL SPRINGS, FL 33071 Mailing Address

8231 W ATLANTIC BLVD CORAL SPRINGS, FL 33071



DO NOT WRITE IN THIS SPACE

04172008 No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0983784

Applied For Not Applicable

5. Certificate of Status Desired

7

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 33311-4132

DO NOT WRITE IN THIS SPACE

, , , , , , ,				IN	THIS SPACE
	named entity submits this statement for the p tions of registered agent.	urpose of changing its registered offic	e or re	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered			Agent signature required when reinslating) DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	000000911534 05/07/08-80044-009 158.75
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAUFMAN, MICHELE 5051 NW 88TH LANE CORAL SPRINGS, FL 33067			,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-S1-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

4/17/08/97/34/363 Datal Dayling Phone 4