

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED

Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000006042

1. Entity Name

GEM MANAGEMENT ENTERPRISES, INC.



Principal Place of Business

SUITE #407 SOUTH
1601 BELVEDERE ROAD
WEST PALM BEACH, FL 33406

Mailing Address

SUITE #407 SOUTH
1601 BELVEDERE ROAD
WEST PALM BEACH, FL 33406



04212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1068225

Applied For
Not Applied

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MAPES, PAUL
SUITE #407 SOUTH
1601 BELVEDERE ROAD
WEST PALM BEACH, FL 33406

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IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acc. the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME ASARCH, MEYER G
STREET ADDRESS SUITE #407 SOUTH 1601 BELVEDERE ROAD
CITY-ST-ZIP WEST PALM BEACH, FL 33406

U000000542688
05/10/06-80108-005 150.00

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IN THIS SPACE

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 1 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

Date

Daytime Phone #

4/24/06 561/689-6601