

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098405

FILED
Mar 06, 2006
Secretary of State

Entity Name: GEMS 4 FEMMES INC

Current Principal Place of Business:

126 MIRACLE MILE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

126 MIRACLE MILE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 90-0067719 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PRATTS, JOSEPH
126 MIRACLE MILE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PRATTS, JOSEPH
Address: 126 MIRACLE HILL
City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: CHRISTEL, MARTIN
Address: 126 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH PRATTS

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03/06/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date