2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108920

Entity Name: A. C. GEMS, INC.

FILED May 03, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

120 ALEXANDRIA BLVD STE 17 OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

120 ALEXANDRIA BLVD STE 17 OVIEDO, FL 32765

FEI Number: 06-1653104 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VAUGHN, JEFF CENTRAL FLORIDA FINANCIAL SERVICES LLC
361 S CENTRAL
OVIEDO, FL 32765 US CENTRAL FLORIDA FINANCIAL SERVICES LLC
1119 BARBADOS AVE
ORLANDO, FL 32825 US

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: DAVID OLIVENCIA 05/03/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: () Change () Addition

 Name:
 CHOKR, ABDALLAH M
 Name:

 Address:
 120 ALEXANDRIA BLVD STE 17
 Address:

 City-St-Zip:
 OVIEDO, FL 32765
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 CHOKR, MOHAMMED
 Name:

 Address:
 2837 SUNLAKE LOOP #211
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ABDALLAH M CHOKR P 05/03/2005