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

DOCUMENT # P93000025436

. Corporation Name

G.C. JEMM, INC.

Principal Place of Business

Mailing Address

500 E. BROWARD BLVD.. SUITE 1950 FORT LAUDERDALE FL 33394

FORT LAUDERDALE FL 33394

500 E. BROWARD BLVD.. SUITE 1950 FORT LAUDERDALE FL 33394

FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90040 011 ***150.00



ORT LAUDENDALE FL 33394	FORT EAUDERDALE PL 33394		DO NOT WRITE IN THIS SPACE				
			Date Incorporated or Qualifed 04/06/1993				
2. Principal Place of Business	2a. Mailing Address	<u> </u>	4. FEI Number	Applied For			
<u> </u>	26		65-0429470	Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country	Zip Co 29 30	ountry	This corporation owes the current year in Personal Property Tax:	ntangible ☐ Yes ☑ No			
9. Name and Address of Curre		1	10. Name and Address of New Registere	d Agent			
BOYLE, CONRAD J 500 E. BROWARD BLVD.		81 Name 82 Street Addr	ress (P.O. Box Number is Not Acceptable)				
CLUTE 1050		 - 					

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.

City

agont. rai	I laminar with and dodopt the songations of source		•						
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	e. (NOTE: Re	gistered Agent signature re	equired when reinstating)	DATE				
12.	originative (speed of production of production of production of speed of sp			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D	☐ DELETE	1.1 TITLE			Change	☐ Addition		
NAME	PERLIN, DAVID		1.2 NAME						
STREET ADORESS	500 E. BROWARD BLVD., #1950		1.3 STREET ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE FL 33394		1.4 CITY-ST-ZIP						
TITLE	PST	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition		
NAME	PERLIN, DAVID		2.2 NAME						
STREET ADDRESS	500 E. BROWARD BLVD., #1950		2.3 STREET ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE FL 33394		2.4 CITY-ST-ZIP						
TITLE	••	DELETE	3.1 TITLE		* *	Change	☐ Addition		
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP			3.4. CITY- ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition		
NAME	•		4.2 NAME		•				
STREET ADDRESS	· , , , , , , , , , , , , , , , , , , ,		4.3 STREET ADDRESS				~		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			- <u>-</u> 12.	F73. 1.180		
TITLE		☐ DELETE	5.1 TITLE			Change	Addition		
NAME			. 5.2 NAME	. "	•				
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY-ST-ZIP	And the same of th					
TITLE		DELETE	6.1 TITLE			Change	Addition		
NAME			6.2 NAME	.*					
STREET ADDRESS			6.3 STREET ADDRESS						
CITY-ST-ZIP	·		6.4 CITY-ST-ZIP						
14 hereby c	ertify that the information supplied with this filing doe	es not qualify for th	e exemption stated	l in Section 119.07(3)(i), Florida Statute:	s. I further cer	tify that the in	tormation		

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 60?. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, op on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE, REDAUMS PERLIN

GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

MAR. 30, 199

807 577 5188

Daytime Ph

CR2E034 (11/9)

85 Zip Code