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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

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| GEM I | | IENTS, INC. | | | | | | | | |
| Principal Place of | of Business | | Ma | iling Address | | | | il filigi dibiri dib | II UTUII IUUSU SU | |
| 10349 S.E. HIGHWAY 441 BELLEVIEW FL 34420 | | | 10349 S.E. HIGHWAY 441 BELLEVIEW FL 34420 | | | | | | | |
| | | | | | | | 3. Date Incorporated or Qualific 07/08/1993 | ed 3a. Da | ate of Last R 04/24/19 | |
| . Principal Plac | ce of Busine | | 2a. | Mailing Address | | | 4. FEI Number | | | Applied For |
| | | | 26 | | | | 59-3190676 | | | Not Applicable |
| Suite, Apt. # | , etc. | | - | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | Additional Required |
| City & State | | | 27 | City & State | | | Election Campaign Financin | 9 - | \$5.0 | O May Be |
| | | | 28 | | | | Trust Fund Contribution | " □ | Adde | d to Fees |
| Zip | | Country | | Zip | Count | ry | 8. This corporation has liability | for intangible Yes \sum No | tax under s | 199.032, |
| <u> </u> | . 1 | and Address of Curre | 29 | tered Agent | 30 | | Florida Statutes K | | d Agent | |
| | 9, Name | and Address of Cult | ent negra | tereu Agent | 8 | 1 Name | 10. 110 | | | |
| RIANC | HARD, DO | ICK A | | | | 2 Street Add | dress (P.O. Box Number is Not Acce | otable) | | |
| | S.E. HIGH | | | | | Street Add | iless (To. Box (all by | | | |
| | NEW FL 3 | | | | 8 | 3 | | | | |
| | | | | | 8 | 4 City | *** | | 85 Z | p Code |
| | | | | E | | | - stice a boots this statement for the | F | | renietered office |
| Pursuant to | o the provisi ad agent, or | ons of Sections 607.050 | 02 and 60. | 7.1508, Florida Stati | ites, the above | a-named corpc | oration submits this statement for the | appointment | as registered | d agent. I am |
| or reasters | | both, in the State of Fic | onda, Sucri | i change was author | ized by the co | rporation's boa | ard of directors. Thereby accept the | opposition. | | |
| or registere familiar with | h, and acce | potn, in the State of Fic pt the obligations of, Se | ection 607.0 | i change was author | ized by the co | rporation's boa | ard of directors. I hereby accept the | ырр 5 | | |
| familiar with SIGNATURE | h, and acce _l | pt the obligations of, Se | ection 607.0 | n change was author 0505, Florida Statute | es. | rporation's boa | red when reinstating) | DATE | | |
| familiar with | h, and acce _l | potn, in the State of Fice pt the obligations of, Se or printed name of registered ag- | ection 607.0 | n change was author 0505, Florida Statute applicable. (*) CTORS | es. | rporation's boa | | DATE | ND DIRECTO | DRS IN 12 |
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