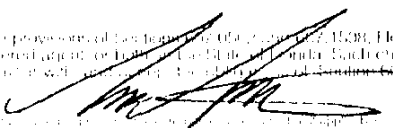
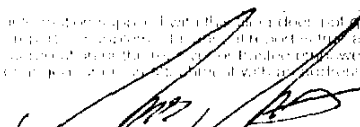


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000084180			
1. Corporation Name: KERRY GEMS, INC. TIA POT OF GOLD			
Principal Place of Business: 9926 S. Highway 441 KEESBURG, FL 34788		Mailing Address: - SAME	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business: 21 9926 S. Highway 441 22 Subst. Art. 1, etc. 23 City & State: KEESBURG, FL 24 Zip: 34788		2a. Mailing Address: SAME 26 State, Apt. #, etc. 27 City & State: 28 Zip: 29 Country:	
3. Date Incorporated or Qualified		4. FEI Number: 59-3216399 Applied For: ☐ Not Applicable	
5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: ☒ Yes ☐ No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent: MICHAEL MURPHY 9926 S. HIGHWAY 441 KEESBURG, FL 34788		10. Name and Address of New Registered Agent: 81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 84 City, FL 85 Zip Code:	
11. Pursuant to the provisions of Section 607.07, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to a 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 understand that any change of the registered office of the corporation shall be filed with the Department of State.			
SIGNATURE:  5/13/98			
12. OFFICERS AND DIRECTORS: 12.1 NAME: MICHAEL MURPHY 12.2 STREET ADDRESS: 9926 S. HIGHWAY 441 12.3 CITY, ST., ZIP: KEESBURG, FL 34788 12.4 TITLE: 12.5 NAME: 12.6 STREET ADDRESS: 12.7 CITY, ST., ZIP: 12.8 TITLE: 12.9 NAME: 12.10 STREET ADDRESS: 12.11 CITY, ST., ZIP: 12.12 TITLE: 12.13 NAME: 12.14 STREET ADDRESS: 12.15 CITY, ST., ZIP: 12.16 TITLE: 12.17 NAME: 12.18 STREET ADDRESS: 12.19 CITY, ST., ZIP: 12.20 TITLE:		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 13.1 NAME: ☐ Change ☐ Addition 13.2 STREET ADDRESS: 13.3 CITY, ST., ZIP: 13.4 TITLE: 13.5 NAME: 13.6 STREET ADDRESS: 13.7 CITY, ST., ZIP: 13.8 TITLE: 13.9 NAME: 13.10 STREET ADDRESS: 13.11 CITY, ST., ZIP: 13.12 TITLE: 13.13 NAME: 13.14 STREET ADDRESS: 13.15 CITY, ST., ZIP: 13.16 TITLE: 13.17 NAME: 13.18 STREET ADDRESS: 13.19 CITY, ST., ZIP: 13.20 TITLE:	
14. I hereby certify that the information supplied hereon is true and correct, and that I am duly qualified for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information provided on this form was prepared in accordance with the provisions of the Florida Statutes 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; and that I am duly qualified to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in the back of the Florida Statutes.			
SIGNATURE:  MICHAEL MURPHY		5/13/98 352-787-3434	

CR2E034 (10/97)