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FILED
May 14 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 # P93000086671 (3)

1. Corporation Name
GEM CATERING, INC.

Principal Place of Business

420 LINCOLN RD
SUITE 235
MIAMI BEACH FL 33139

Mailing Address

420 LINCOLN RD
SUITE 235
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 20900 West Dixie Hwy

Suite, Apt. #, etc.

22 A

City & State

23 N. MIAMI BEACH FL

Zip

24 33180

Country

25 USA

2a. Mailing Address

26 20900 West Dixie Hwy

Suite, Apt. #, etc.

27 A

City & State

28 N. MIAMI BEACH FL

Zip

29 33180

Country

30 USA

3. Date Incorporated or Qualified

12/20/1993

4. FEI Number

65-0455522

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

ERSKINE, STANLEY B
55 WESTON RD
SUITE 300
FT LAUDERDALE FL 33326

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 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
STREET ADDRESS SPADARO, EUGENE
CITY-ST-ZIP 420 LINCOLN RD SUITE 235
MIAMI BEACH FL 33139

TITLE ☐ DELETE

NAME SD
STREET ADDRESS NESS, GERALD
CITY-ST-ZIP 420 LINCOLN RD SUITE 235
MIAMI BEACH FL 33139

TITLE ☐ DELETE

NAME TD
STREET ADDRESS NUNBERG, VICTOR
CITY-ST-ZIP 420 LINCOLN RD SUITE 235
MIAMI BEACH FL 33139

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 20900 West Dixie Hwy Suite A
1.4 CITY-ST-ZIP N. MIAMI BEACH, FL 33180

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 20900 West Dixie Hwy Suite A
2.4 CITY-ST-ZIP N. MIAMI BEACH, FL 33180

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 20900 West Dixie Hwy Suite A
3.4 CITY-ST-ZIP N. MIAMI BEACH, FL 33180

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature] 4/14/98

CR2E034 (10/97)