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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000085894 (0)

GEM INDUSTRIAL SUPPLY, INC.							
Principal Place of Business	Mailing Address				1 10011001 110 10101 0111 00111 00111 0	IINI BUNDA NUNUN UNKUN NUNKO	
5040 SW 29TH WAY PO BOX 1433 FT LAUDERDALE FL 33312 DAMA FL 33004					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					11/08/1995		
2, Principal Place of Business	2a. Mailing Address				4. FEI Number		Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.				65-0618211		Not Applicable
22					5. Certificate of Status Desired		Additional Required
City & State City & State					8. Election Campaign Financing	\$5.0	May Be
23 28		-,			Trust Fund Contribution	Adde	to Fees
Zip Country	Zφ	Countr	У		8. This corporation owes or has pa		
24 25 9. Name and Address of Curren	29	30			Personal Property Tax due June 10. Name and Address of New Re		☐ No
		81	Name		10, Name and Address of New Re	distaled What	
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE					o (P.O. Boy Number in Net Assessable	alo)	
CORAL GABLES FL 33134		82		- Addres	Address (P.Ö. Box Number is Not Acceptable)		
		83					
		84	' '			FL	Code
Pursuant to the provisions of Sections 607.050; office or registered agent, or both, in the State agent. I am familiar with, and accept the oblige SIGNATURE Signature, typed or printed name of registered agent.	nt and title if applicable (NO	E: Registered Ac			when reinstaling)	DATE	
12. OFFICERS AND	DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
NAME MAERKEL, EUGENE J		1.1 TITLE 1.2 NAME				L. Change	☐ Abdillon
STREET ADDRESS 5040 SW 29TH WAY			T ADDRESS				
CITY-ST-ZIP FT LAUDERDALE FL 33312		1.4 CITY-		'			
TITLE VSTD	DELETE	2.1 TITLE	31-211	┪		Change	Addition
NAME DE VITA, MICHAEL A		2.2 NAME					
STREET ADDRESS 5040 SW 29TH WAY		2.3 STREE	T ADDRESS	: 1			
CITY-ST-ZIP FT LAUDERDALE FL 33312		2. 4 CITY	ST-ZIP				
TITLE	DELETE	3.1 TITLE	-	1		☐ Change	Addition
NAME	32 M						
STREET ADDRESS		3.2 NAME					
CITY-ST-ZIP			t address				
TITLE							
	DELETE	3.3 STREE				Change	Addition
NAME	DELETE	3.3 STREE 3.4. CITY-	ST-ZIP			Change	Addition
NAME STREET ADDRESS	DELETE	3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME	ST-ZIP			Change	Addition
STREET ADDRESS CITY-ST-ZIP		3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	ST-ZIP				
STREET ADDRESS CITY-ST-ZIP TITLE	DELETE	3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE	ST-ZIP T ADDRESS ST-ZIP			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME		3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	ST-ZIP T ADDRESS ST-ZIP				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE	ST-ZIP T ADDRESS ST-ZIP T ADDRESS				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	ST-ZIP T ADDRESS ST-ZIP T ADDRESS			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		3.3 STREE 3.4. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE	ST-ZIP T ADDRESS ST-ZIP T ADDRESS 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.

6.4 CITY-ST-ZIP