

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000045582

Entity Name: VALUE GEM, INC.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

4675 PONCE DE LEON
SUITE 302
MIAMI, FL 33146 US

New Principal Place of Business:

36 N.E. 1ST STREET
SUITE 229
MIAMI, FL 33132 US

Current Mailing Address:

4675 PONCE DE LEON
SUITE 302
MIAMI, FL 33146 US

New Mailing Address:

36 N.E. 1ST STREET
SUITE 229
MIAMI, FL 33132 US

FEI Number: 65-0692681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, R K
4675 PONCE DE LEON
SUITE 302
MIAMI, FL 33146 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NASSER, L A
Address: 4675 PONCE DE LEON BLVD. STE 302
City-St-Zip: CORAL GABLES, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NASSER, LUIS A
Address: 36 N.E. 1ST STREET, SUITE 229
City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS A NASSER

PRES

05/01/2007

Electronic Signature of Signing Officer or Director

Date