

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

FILED  
Jun 18 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000096503 (3)

1. Corporation Name:  
EAGLES GEM, INC.



Principal Place of Business  
940 SWEETWATER LANE, #516  
BOCA RATON FL 33432

Mailing Address  
940 SWEETWATER LANE, #516  
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	10812 South US 1	26	10812 South US 1	11/21/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0695155	
City & State		City & State		Applied For	
23 Port St. Lucie, FL		28 Port St. Lucie, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
24 34952		29 34952		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
25 USA		30 USA			

9. Name and Address of Current Registered Agent

MALPASS, JENNIFER E  
940 SWEETWATER LANE, #516  
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
	1192 S.E. 2nd Avenue
83	
84	City
	Deerfield Beach, FL
85	Zip Code
	33441

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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	V/S/D/C
NAME	MALPASS, JENNIFER E	1.2 NAME	Malpass, Jennifer E
STREET ADDRESS	940 SWEETWATER LANE, #516	1.3 STREET ADDRESS	1192 SE 2nd Ave.
CITY-ST-ZIP	BOCA RATON FL 33432	1.4 CITY-ST-ZIP	Deerfield Beach, FL 33441
TITLE		2.1 TITLE	P/S
NAME		2.2 NAME	J.C. Bartlett
STREET ADDRESS		2.3 STREET ADDRESS	281 SE Todd Ave.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Port St. Lucie, FL 34983
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	2000002565002
NAME		6.2 NAME	-06/19/98-01017-040
STREET ADDRESS		6.3 STREET ADDRESS	***158.75
CITY-ST-ZIP		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:

*J.C. Bartlett*

President

*Jun 14 1998*

(561) 398-9168

CR2E034 (10/97)