

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 91013 047 ***150.00

DOCUMENT # *P980000005922*
1. Entity Name *GEM'S MANAG. INTERNATIONAL CORP.*



DO NOT WRITE IN THIS SPACE

10046504

2. Principal Place of Business
2442 Garfield St. Suite #3
City & State *HOLLYWOOD FL*
Zip *33020* Country *BROWARD*

3. Mailing Address
2442 Garfield St. Suite #3
City & State *HOLLYWOOD FL*
Zip *33020* Country *BROWARD*

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4. FEI Number *#65-0806532*
Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name *GEMMA BREVERY*
Street Address (P.O. Box Number is Not Acceptable) *2442 GARFIELD ST. Suite #3*
City *HOLLYWOOD* FL Zip Code *33020*

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Gemma Brevery President & Treasurer* DATE *3-20-03*
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

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CR2E034B (12/02)

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE *Gemma Brevery* *GEMMA BREVERY* DATE *3/20/03* *954-921-8755*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #