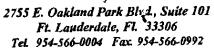
## 2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # **P99000036659** 1. Entity Name GEMETALS, CORP. 07-21-2000 90160 024 \*\*\*150.00 Principal Place of Business Mailing Address 400 N. STATE RD. 7. STE. 310 400 N. STATE RD. 7. STE. 310 MARGATE FL 33063 MARGATE FL 33063 2. Principal Place of Business 3. Mailing Address 2765 E. Oakland Pk. Blue DAKLAND PK BEND DO NOT WRITE IN THIS SPACE Suite Act # etc Suite, Apt. #, etc. 0 101 4. FEI Number 65-0916768 City & State City & State Applied For LAUDERDAL Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PAUL WILSON, ALICIA 400 N. STATE RD. 7, STE. 310 MARGATE FL 33063 City 8. The above named entity of pritts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 11. OFFICERS AND DIRECTORS 12. PD Change Addition Delete TITLE TITLE SADRIWAUA, ABBAS NAME NAME WILSON, ALICIA # 101 E. Oak Land Pk. Blud STREET ADDRESS STREET ADDRESS 400 N. STATE RD. 7, STE. 310 CITY-ST-ZIP CITY-ST-ZIP 306 Margate Fl 33063 ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET AUDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Detete TITLE NAME MAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 eath; that I am an officer or director of the corporation or the exercise or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

## Aug 14, 2000 8:00 am Secretary of State

p99000036659

## GEMETALS, CORP.





July 10, 2000

Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Re: 2000 Uniform Business Report:

To Whom It May Concern:

We did not receive the initial 2000 Uniform Business Report, and would have filed the report and paid timely, had we received it.

Attached are the signed report and our check for \$150.00.

Thank you for your cooperation.

Abbas A. Sadriwalla

President