

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

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 10 1997 8:00am
Secretary of State

DOCUMENT # **V37402**
1. Corporation Name
U-GEM, inc.

no business and owner is a non resident alien, staying based on an E2 investors visa, the corporation was not aware that filing had to be before 5/1-97

Principal Place of Business Mailing Address
**2463 SADDLEWOOD LANE
PALM HARBOR
FLORIDA 34685**

3. Date Incorporated or Qualified **5/18/1992** 3a. Date of Last Report
4. FEI Number **59-3355311** Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 **2463 SADDLEWOOD LANE**
22 City & State 27 Suite, Apt. #, etc.
23 Zip Country 28 **PALM HARBOR**
24 25 **FL 34685** 30

9. Name and Address of Current Registered Agent
**A.V. BRANDENBERGER
700 MEASE PLAZA Apt. 834
DUNEDIN FLORIDA 34698**

10. Name and Address of New Registered Agent
81 Name **Udo K.G. Duijne (President)**
82 Street Address (P.O. Box Number is Not Applicable) **2463 SADDLEWOOD LANE**
83
84 City **PALM HARBOR** FL 85 Zip Code **34685**

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 for 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]* (NOTE: Registered Agent signature required when registering.) DATE: **June 2, 1997**

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT / DIRECTOR <input type="checkbox"/> DELETE
NAME	UDO K.G. DUIJNE
STREET ADDRESS	2463 SADDLEWOOD LANE
CITY-ST-ZIP	PALM HARBOR FL 34685
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	800002211828
63 STREET ADDRESS	-06/13/97--01088--007
64 CITY-ST-ZIP	***225.00

14. I do 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: *[Signature]* **UDO K.G. DUIJNE, President** 6/2-97

CR2E034 (9/96)