

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90064 025 ***150.00

DOCUMENT # P93000070996

1. Entity Name

GEMINIS BUSINESS GROUP, INC.

Principal Place of Business

Mailing Address

% DON PAN INTERNATIONAL
 10700 W. FLAGLER ST
 MIAMI FL 33174
 US

10700 W. FLAGLER ST
 MAIMI FL 33174
 US

2. Principal Place of Business

3. Mailing Address

15990 NW 49 Ave
 Suite, Apt. #, etc.

15990 NW 49 Ave
 Suite, Apt. #, etc.

City & State

City & State

Miami - FL

Miami - FL

Zip

Country

Zip

Country

33014 USA

33014 USA

4. FEI Number

65-0518288

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

IGNACIO, MORRNO
 10700 W. FLAGLER ST
 MIAMI FL 33174

Name 15990 NW 49 Ave

Street Address (P.O. Box Number is Not Acceptable)

City Miami - FL

Zip Code 33014

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PD	GORRIN, JUAN		
STREET ADDRESS	10700 WEST FLAGLER STRET		
CITY-ST-ZIP	MIAMI FL		
TD	MORENO, IGNACIO		
STREET ADDRESS	10700 WEST FLAGLER STRET		
CITY-ST-ZIP	MIAMI FL		
SD	IGNACIO, MORENO		
STREET ADDRESS	10700 W. FLAGLER ST		
CITY-ST-ZIP	MIAMI FL		
VPD	ALVARO, GORRIN		
STREET ADDRESS	10700 W. FLAGLER ST		
CITY-ST-ZIP	MIAMI FL		

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

[Handwritten Signature]

4/23/01

305-6247422

CR2E034 (10/00)

Prep. Date: 4/21 | Box Number: 54