

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

WYNNE B. MONTGOMERY

GOVERNOR

1200 BANKERS BUILDING, SUITE 1000, JACKSONVILLE, FL 32202

1995

DOCUMENT # **V26168**

(7)

95 MAY 1 11 21 40

GEMINI 57, INC.

SEC
FILED

7100 SW 8TH ST
PLANTATION FL 33317

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PLANTATION FL 33317

DO NOT WRITE IN THIS SPACE

3. Date Incorporation (Chapter 1)	3a. Date of Last Report
04/01/1992	05/01/1994
4. FIC Number	Applied For
65-0339376	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 a subsidiary corporation under Chapter 136, Florida Statutes.	Yes ☐ No ☐

2. Principal Office	2a. Mailing Address
21. Principal Office	26. Mailing Address
22. Principal Office	27. Mailing Address
23. Principal Office	28. Mailing Address
24. Principal Office	29. Mailing Address
25. Principal Office	30. Mailing Address

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALKER, RAYMOND S.
7100 SW 8TH ST
PLANTATION FL 33317

81. Name	
82. Street Address P.O. Box Number or Post Office	
83. City	
84. State	FL
85. Zip Code	

11. I, the undersigned, the president of Sections 607.0502 and 607.1503, Florida Statutes, the duly authorized corporation submit this statement for the purpose of changing its registered office to the place specified herein as the State of Florida. Such change was authorized by the corporation's board of directors. I hereby declare that the above-stated registered agent is in compliance with the provisions of Sections 607.0503, Florida Statutes.

Not a Party

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	P WALKER, ARLINE M. 7100 SW 8TH STREET PLANTATION FL	1. NAME	☐ Change ☐ Addition
STREET ADDRESS	VPS WALKER, RAYMOND S 7100 SW 8 ST PLANTATION FL	2. NAME	☐ Change ☐ Addition
CITY		3. NAME	☐ Change ☐ Addition
STATE		4. NAME	☐ Change ☐ Addition
ZIP		5. NAME	☐ Change ☐ Addition
NAME		6. NAME	☐ Change ☐ Addition
STREET ADDRESS		7. NAME	☐ Change ☐ Addition
CITY		8. NAME	☐ Change ☐ Addition
STATE		9. NAME	☐ Change ☐ Addition
ZIP		10. NAME	☐ Change ☐ Addition
NAME		11. NAME	☐ Change ☐ Addition
STREET ADDRESS		12. NAME	☐ Change ☐ Addition
CITY		13. NAME	☐ Change ☐ Addition
STATE		14. NAME	☐ Change ☐ Addition
ZIP		15. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stipulated in Section 607.0503, 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. I am not an officer or director of this corporation at the time this report is completed by Chapter 136, Florida Statutes, and that my name appears on the list of officers or directors of this corporation.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]