

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H67143 (8)

1. Corporation Name
GEMINI INDUSTRIAL SUPPLY CORP.



Principal Place of Business

Mailing Address

**1570 MADRUGA AVENUE
SUITE 311
CORAL GABLES FL 33146**

**1570 MADRUGA AVENUE
SUITE 311
CORAL GABLES FL 33146**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

g. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/18/1985

3a. Date of Last Report

02/23/1995

4. FET Number

59-2556811

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. 190.032, Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**LEVIN, STANTON G.
12120 S.W. 70TH COURT
MIAMI FL 33156**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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 607.0605, Florida Statutes.

SIGNATURE

Signature of person making change to the corporation

Signature of Registered Agent (if different from above)

Date

12. OFFICERS AND DIRECTORS

1. TITLE	PD	☐ DELETE
2. NAME	LEVIN, STANTON G.	
3. STREET ADDRESS	12120 SW 70TH CT.	
4. CITY-STATE	MIAMI FL	
5. TITLE	VD	☐ DELETE
6. NAME	SUSSMAN, WILLIAM C.	
7. STREET ADDRESS	1570 MADRUGA AVE	
8. CITY-STATE	CORAL GABLES FL	
9. TITLE	TD	☐ DELETE
10. NAME	ORKIN, JACK LEE	
11. STREET ADDRESS	8000 SW 155TH ST.	
12. CITY-STATE	MIAMI FL	
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE		
21. TITLE		☐ DELETE
22. NAME		
23. STREET ADDRESS		
24. CITY-STATE		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE	

14. I do hereby certify that the information supplied in this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Book 12 or Book 13 of the records on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stanton G. Levin, President

(305) 662-1988

Date

Printed Name

CR2E034 (12/95)