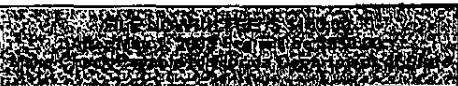


FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91500 001 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000071194			
1. Entity Name GEMINI VERO MANAGEMENT, INC.			
Principal Place of Business 3300 SW 190TH AVE MIRAMAR, FL 33029		Mailing Address 3300 SW 190TH AVE MIRAMAR, FL 33029	
2. Principal Place of Business 968 MARINA DR		3. Mailing Address 968 MARINA DR	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State WESTON FL		City & State WESTON FL	
Zip 33327	Country BROWARD	Zip 33327	Country BROWARD
4. FEI Number 37-1443375		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEGAL INFORMATION SERVICES INC. 1290 WESTON RD, STE 300 FT LAUDERDALE, FL 33331		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE	
(NOTE: Registered Agent Signature depends upon authority)		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLUBOWSKI, JERRY 3300 SW 190TH AVE MIRAMAR, FL 33029 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Slubowski, Jerry 968 Marina Dr Weston, FL 33327 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALLERSTEIN, STEVEN 3300 SW 190TH AVE MIRAMAR, FL 33029 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Steve Wallerstein 8000 Cleary Blvd Apt 803 Plantation, FL 33324 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  JERRY P. SLUBOWSKI		Date 4-24-03 Copying Fee 9543852487	

CRE034 (10/02)