## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000141194

City-St-Zip:

PORT CHARLOTTE, FL 33948 US

Entity Name: JUST GEMINI CLEANING INC

FILED Apr 25, 2005 Secretary of State

Entity Nan	ne: JUST GE	WIINI CLEANING INC.					
Current Principal Place of Business:			New	New Principal Place of Business:			
	TENDON STR DRT, FL 34286			76 EDGEWATER RT CHARLOTTE		US	
Current Mailing Address:				New Mailing Address:			
	TENDON STR DRT, FL 34286			76 EDGEWATER RT CHARLOTTE		US	
FEI Number:	20-1737755	FEI Number Applied For()	FEI Number N	lot Applicable ( )	Certifica	ate of Status Desi	red ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
ROQUE, GINGER 2471 CRITTENDON STREET NORTH PORT, FL 34286 US				ROQUE, GINGER 857 WEBSTER AVENUE PORT CHARLOTTE, FL 33948 US			
The above in the State		submits this statement for the p	ourpose of cha	nging its register	red office or r	egistered agen	t, or both,
SIGNATURE:				04/25/2005			
Electronic Signature of Registered Agent				Date			
Election Can	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D,P () MCCULLOUGH, 3633 RIBERA A NORTH PORT, I	VENUE	Title: Name Addre City-	e:	( ) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	D,VP () ROQUE, GINGE 2471 CRITTEND NORTH PORT, I	OON STREET	Title: Name Addre City-	e: ROQUE, (	(X) Change GINGER STER AVENUE IARLOTTE, FL	. ,	
Title: Name: Address:	D,S () KILEY, JANET 19476 EDGEWA	Delete	Title: Name Addre	e:	( ) Change	( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JANET KILEY D.S. 04/25/2005