2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008
Secretary of State

DOCUMENT# P05000136951

Entity Name: GEMINI CARGO LOGISTICS, INC.

Current Principal Place of Business:

1750 NW 66TH AVE., STE. 214, BUILDING 708
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

44965 AVIATION AVE STE 300
DULLES, VA 20166

New Mailing Address:

FEI Number: 52-2069248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete
Name: WOODWARD, SAMUEL
Address: 44965 AVIATION DRIVE
City-St-Zip: DULLES, VA 20166

Title: D ( ) Delete
Name: CAPLE, JOHN
Address: BAYSIDE CAPITAL, 1001 BRICKELL BAY DRIVE
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: WILSON, MATTHEW
Address: BAYSIDE CAPITAL, 1001 BRICKELL BAY DRIVE
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: BOLDUC, JOHN
Address: BAYSIDE CAPITAL, 1001 BRICKELL BAY DRIVE
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: MNAYMNEH, SAMI
Address: BAYSIDE CAPITAL, 1001 BRICKELL BAY DRIVE
City-St-Zip: MIAMI, FL 33131

Title: VP,S ( ) Delete
Name: CRESTON, DONALD
Address: 44965 AVIATION DRIVE, SUITE 300
City-St-Zip: DULLES, VA 20166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: KAHN, LARRY
Address: 44965 AVIATION DRIVE
City-St-Zip: DULLES, VA 20166

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ZAMANY, AHMAD
Address: 44965 AVIATION DRIVE
City-St-Zip: DULLES, VA 20166

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: DONALD CRESTON VP,S 05/02/2008

Electronic Signature of Signing Officer or Director Date