

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000066918

FILED
Aug 06, 2009
Secretary of State

Entity Name: GEMINI ADVENTURE FITNESS, INC.

Current Principal Place of Business:

905 BRICKELL BAY DR
SUITE # 1027
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

905 BRICKELL BAY DR
SUITE # 1027
MIAMI, FL 33131

New Mailing Address:

40-44 W 111TH ST
2H
NEW YORK, NY 10026

FEI Number: 26-0317888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAPAKOSTAS, STACY
905 BRICKELL BAY DR
1027
MIAMI, FL 33131 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: D () Delete
Name: PAPAKOSTAS, STACY
Address: 905 BRICKELL BAY DR # 1027
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: STACY PAPAKOSTAS

PRES

08/06/2009

Electronic Signature of Signing Officer or Director

_____ Date