2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2008
Secretary of State

DOCUMENT# P07000110012

Entity Name: GEMINI SPECIALTIES, INC.

Current Principal Place of Business:

15 HARGROVE LANE UNIT 6-F
PALM COAST, FL 32137 US

New Principal Place of Business:

Current Mailing Address:

15 HARGROVE LANE UNIT 6-F
PALM COAST, FL 32137 US

New Mailing Address:

FEI Number: 51-0653052 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PELIGIAN, FARKIS PETER
1 TWISTED OAK PLACE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

PELIGIAN, SARKIS PETER
1 TWISTED OAK PLACE
PALM COAST, FL 32137 US

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: SARKIS PETER PELIGIAN 01/20/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PELIGIAN, FARKIS PETER
Address: 1 TWISTED OAK PLACE
City-St-Zip: PALM COAST, FL 32137 US

Title: V,S ( ) Delete
Name: PELIGIAN, SHARON ANN
Address: 1 TWISTED OAK PLACE
City-St-Zip: PALM COAST, FL 32137 US

Title: T ( ) Delete
Name: PELIGIAN, ARIA ANOUSH
Address: 1 TWISTED OAK PLACE
City-St-Zip: PALM COAST, FL 32137 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PELIGIAN, SARKIS PETER
Address: 1 TWISTED OAK PLACE
City-St-Zip: PALM COAST, FL 32137 US

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: SARKIS PETER PELIGIAN P 01/20/2008
Electronic Signature of Signing Officer or Director Date