FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P30060** **(8)**

1. Corporation Name

GEMINI MEDICAL PRODUCTS INC.

Principal Place of Business

11236 47TH STREET. NORTH
CLEARWATER FL 34622
US

Mailing Address

%CORPORATION TRUST COMPANY
1209 ORANGE STREET
WILMINGTON DE 19801

3. Date Incorporated or Qualified: 07/03/1990
3a. Date of Last Report: 08/07/1995
4. FEI Number: 51-0327251 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

PEARL, ALEX
11236 47TH STREET NORTH
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE [signature] ALEX PEARL SECRETARY April 29, 1996
DATE

12. OFFICERS AND DIRECTORS

TITLE	C	☐ DELETE
NAME	TURNBULL, MARK A.	
STREET ADDRESS	27 NORTH 3RD ST.	
CITY-ST-ZIP	PHILADELPHIA PA	
TITLE	S	☐ DELETE
NAME	PEARL, ALEX	
STREET ADDRESS	11236 47TH STREET NORTH	
CITY-ST-ZIP	CLEARWATER FL 34622	
TITLE	D	☐ DELETE
NAME	HEVENER, RICHARD	
STREET ADDRESS	27 NORTH 3RD STREET	
CITY-ST-ZIP	PHILADELPHIA PA	
TITLE	D	☐ DELETE
NAME	BARRY, BRAD	
STREET ADDRESS	27 NORTH 3RD ST.	
CITY-ST-ZIP	PHILADELPHIA PA	
TITLE	D	☐ DELETE
NAME	SYREK, RICHARD	
STREET ADDRESS	27 NORTH 3RD ST.	
CITY-ST-ZIP	PHILADELPHIA PA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition	
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	☐ Change ☐ Addition	
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	☐ Change ☐ Addition	
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	☐ Change ☐ Addition	
4.2 NAME		
4.3 STREET ADDRESS	600001829056	
4.4 CITY-ST-ZIP	-05/20/96--01039--025	
5.1 TITLE	***200.00	☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	☐ Change ☐ Addition	
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] ALEX PEARL April 29, 1996 215-592-8880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)