

P94000015101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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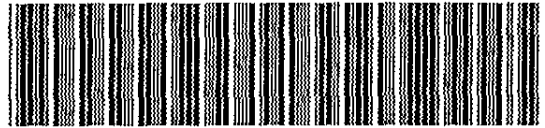
(Business Entity Name)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GEMINI MEDICAL SUPPLY INC.
(Name of Corporation)

DOCUMENT NUMBER: P94000015101

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALEJANDRO CASTRO
(Name of Person)

(Name of Firm/Company)

4010 SW 112 AVE
(Address)

MIAMI FL. 33165
(City/State and Zip Code)

For further information concerning this matter, please call:

ALEJANDRO CASTRO at (786) 253-7488
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ALEJANDRO CASTRO, hereby resign as VICE PRESIDENT
(Title)

of GEMINI Medical Supply, INC.
(Name of Corporation)

P94000015101, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA ... EFFECTIVE JUNE 28, 2003


(Signature of resigning officer/director)
Alejandro Castro

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314