## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000061028 (3) **DOCUMENT #** 

GEMINI IMPORT/EXPORT CORP.

Principal Place of Business

Mailing Address

8090 WEST 18 COURT

8090 WEST 18 COURT



HIALEAH FL	33014	HIALEAH FL 33014								
						3. Date Incorporated or Qualified 08/08/1995	3a. Date o	of Last	: Report	
2. Principal Plac		a. Mailing Address				4. FEI Number			Applied For	
21 <i> 4340  </i>	LAKE CANDLEUDOD CI 24	6 14340 LAH	KE CH	B	EUMA	65-0600599	<del></del>	<u> </u>	Not Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		-		5. Certificate of Status Desired			75 Additional e Required	
City & State . 23 MIAMI		City & State  MIAMILAKE	<u> </u>	FZ	cript	Election Campaign Financing     Trust Fund Contribution			.00 May Be ded to Fees	
Zip	Country	Zip	Coun	try	DE	This corporation has liability for Florida Statutes	intangible tax	under	s 199.032,	
24 3 <i>301</i>	9. Name and Address of Current Reg		130 4	203	Ψ <u>—</u>	10. Name and Address of New F		gent		
	g. Helite and Address of Cultert Hes	giatorea Againt		81	Name	10: 110: 110: 110: 110: 110: 110: 110:		<b>3</b> • · · · ·		
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD					82 Street Address (P.O. Box Number is Not Acceptable)					
¥ 1 ¥ 1 1	MERIA AVENUE GABLES FL 33134		ļ.	B3						
OONAL	CADELO I E 30104		Ī	B4	City		 FL	85	Zıp Code	
or registered	the provisions of Sections 607.0502 and d agent, or both, in the State of Florida. So , and accept the obligations of, Section 60	uch change was authoriz	ed by the co	orpo	ration's board	of directors. I hereby accept the app	ointment as r	egiste	red agent. I am	
SIGNATURE:	gnature, typed or printed name of registered agent and title	e if applicable. (NC	OTE: Registered A	gent	signature required	when reinstating)	DATE			
12.	OFFICERS AND DIF		13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIREC	TORS IN 12	
TITLE	PTD	DELETE	1. 1 T <sub>1</sub> T	L E				Chang	ge 🔲 Addition	
NAME	AL-LUCH, NABIL HACH		1.2 NA	ΜE	1					
STHEET ADDRESS	8090 WEST 18 COURT		1.3 SYF	REET	ADDRESS					
CITY-ST-ZIP	HIALEAH FL 33014		1.4 CIT	Y - ST	- 21P					
TITLE	VSD	☐ DELETE	2 1 717	LE				Chan	ge 🔲 Addition	
NAME	PAEZ, JEANNE C		. 22 NA	ME						
STREET ADORESS	8090 WEST 18 COURT		23 STF	REET	ADDRESS					
CITY-ST-ZIP	HIALEAH FL 33014		2.4 CiT	Y-ST	i - ZIP					
TOLE		☐ DELETE	3 1 TH	L <b>F</b>				) Chan	ge 🔲 Addition	
NAME			3 2 NA	ME						
STREET ADDRESS			3.3 ST	REET	ADDRESS					
CITY-ST-ZIP			3.4 CIT	Y-\$1	r-zip					
TITLE		DELETE	4. 1 TIT	LE				] Chan	ge 🔲 Addition	
NAME			4.2 NAI	ME						
STREET ADDRESS			4.3 STF	REET.	ADDRESS					
City-St-ZiP			4.4 CIT	Y - S1	r- ZIP				<u>-</u>	
TITLE		DELETE	5. 1 11	LE	1			] Chan	ge 🔲 Addition	
NAME		4	5 2 NA	ME						
STREET ADDRESS			5 3 STF	REET.	ADDRESS					
CITY-ST-ZIP			5 4 CIT	Y-\$!	T - ZIP					
THILE		☐ DELETE	6 1 111	LE				] Chan	ge 🔲 Addition	
NAME			62 NA	ME	-					
STREET ADDRESS			63 ST	REET	ADDRESS					
CITY-ST-ZIP			6.4 CIT							
4.4 Ldo baraby	certify that the information supplied with t	this filing is voluntarily furn	nished and c	loes	not qualify to	or the exemption stated in Section 119 e and that my signature shall have the	1.07(3)(k), Flor	ida St	atutes. I further	

certify that the information indicates on this annual report of supplemental and oath; that I am an officer or director of the corporation or the receiver or trust appears in Block 12 or Block 13 if changed, or on an attachment with an adj

SIGNATURE: NABIL HACH AL-LUCH

4/17/196 (505) 558-1400