

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90197 026 ***158.75

DOCUMENT # P98000065130

1. Entity Name
GEMINI MED-GAS SERVICES, INC.

Principal Place of Business

1513 OHIO AVENUE
DUNEDIN FL 34698

Mailing Address

1513 OHIO AVENUE
DUNEDIN FL 34698

2. Principal Place of Business

795 County Rd 1
Suite, Apt. #, etc.
Lot #2

3. Mailing Address

795 County Rd 1
Suite, Apt. #, etc.
Lot #2

City & State

Palm Harbor

City & State

Palm Harbor

Zip

FL

Country

USA

Zip

34683

Country

USA

4. FEI Number

59-3524526

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLINGER, GEORGE M
1513 OHIO AVE
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name
Klinger, George M

Street Address (P.O. Box Number Not Acceptable)
795 County Rd 1, Lot 2

City
Palm Harbor

FL

Zip Code
34683

8. 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

George M. Klinger
 Signature, typed or printed name of registered agent and not applicable.

George M. Klinger Pres.

4-16-02

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
P
NAME
KLINGER, GEORGE M
STREET ADDRESS
1513 OHIO AVENUE
CITY-ST-ZIP
DUNEDIN FL 34698

TITLE
ST
NAME
KLINGER, NADINE
STREET ADDRESS
1513 OHIO AVENUE
CITY-ST-ZIP
DUNEDIN FL 34698

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
P
NAME
George M. Klinger
STREET ADDRESS
795 County Rd 1, Lot 2
CITY-ST-ZIP
Palm Harbor, FL 34683

TITLE
ST
NAME
Nadine Klinger
STREET ADDRESS
795 County Rd 1, Lot 2
CITY-ST-ZIP
Palm Harbor, FL 34683

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Nadine Klinger*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-02

Date

787-423-4519

Daytime Phone #

CR2E034 (9/01)