2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 13, 2001 8:00 am Secretary of State DOCUMENT # P99000010753 GEMINI CONSTRUCTION GROUP., INC. 04-13-2001 90065 027 ***158.75 Principal Place of Business Mailing Address 4701 N.W. 41ST COURT 4701 N.W. 41ST COURT LAUDERDALE LAKES FL 33319 LAUDERDALE LAKES FL 33319 3. Mailing Address 2. Principal Place of Business 1397 VICTORIA ISLE OR Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0891641 Not Applicable Country BROWARD \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HAYNES, ERIC L Street Address (P.O. Box Number is Not Acceptable) 4701 N.W. 41ST COURT LAUDERDALE LAKES FL 33319 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. D.VP ☐ Addition TITLE □ Delete TITLE HAYNES, ERICL 4701 NW 4135 OT NAME HAYNES, ERIC L NAME STREET ADDRESS STREET ADDRESS 4701 N.W. 41ST COURT LAVOERDALE LAKES, FL 333K CITY-ST-ZIP CITY-ST-ZIP LAUDERDALE LAKES FL 33319 Change D, P.S STEVEN M Wallesstein ☐ Addition ☐ Delete TITLE TITI F NAME WALLERSTEIN, STEVEN NAME 1397 VICTORIA ISLE DR STREET ADDRESS STREET ADDRESS 4701 N.W. 41ST COURT CITY-ST-ZIP HESTON FL 33727 CITY-ST-ZIP LAUDERDALE LAKES FL 33319 Addition ☐ Change PRESIDENT ☐ Delete TITLE TITLE STEVEN -M WALLESTEW WALLERSTEIN, DEBORAH B NAME._ NAME 1397 VICTORIA ISLE OR VICTORIA ISLE BR STREET ADDRESS STREET ADDRESS INESTON FL 33327 CITY-ST-ZIE CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attachm

54-384-2547

Daytime Phone #