

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED

99 JAN 21 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000049351

1. Corporation Name

GOURMET QUARTERS, INC.

Principal Place of Business

Mailing Address

2601 LEPRECHAUN LANE
PALM HARBOR FL 34683

35246 U.S. 19 N.
#222
PALM HARBOR FL 34684



If above addresses are incorrect in any way, line through incorrect information and enter correction

REINSTATEMENT

98-99

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Modified To Do Business in Florida

06/10/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3384051

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	DALY, SUSAN W	2801 LEPRECHAUN LANE	PALM HARBOR FL 34683
VP	BOOTHBY, TIMOTHY MEYER, Stacey	1424 SEAGULL DR., #306 3201 Custer Dr.	PALM HARBOR FL Holiday, FL.
ST	DALY, JOSEPH HALL, Sandy	2801 LEPRECHAUN LANE 630 Lake Holloway Blvd.	PALM HARBOR FL 34683 Lakeland, FL. 33801
BMO	DALY, LEE ANN SITTMAN, Stephanie	55 W. 92ND ST., #2B 228 Brookside Ct.	NEW YORK NY 10025 Palm Harbor, FL. 34683 34683
			500002751805--4 -01/22/99--01087--022 ***750.00 ***750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DALY, SUSAN W 2801 LEPRECHAUN LANE PALM HARBOR FL 34683	Name
	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt. #, Etc.
	City

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Susan W. Daly REGISTERED AGENT MUST SIGN
Date: Dec. 30, 98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Susan W. Daly **REQUIRED** Dec. 30, 98 (122)787-0906
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #