

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 293084

1. Corporation Name

GULMA WHOLESALE, INC.

Principal Place of Business

2345 N W 21 TERR
MIAMI FL 33142

Mailing Address

2345 N W 21 TERR
MIAMI FL 33142

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/19/1965

5. FEI Number

59-1098004

Applied For

Not Applicable

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	4 City / State / Zip
P	GARCIA, JORGE M	2150 NW 9TH ST.	MIAMI FL
V	MONTEJO, MAURICIO	6520 S.W. 17TH STREET	MIAMI FL
T	OLLET, JULIO	1015 S.W. 88TH AVENUE	MIAMI FL
S	GARCIA, DOLORES M	2150 N.W. 9TH ST	MIAMI FL 33125

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GARCIA, JORGE M.
2150 N.W. 9ST.
MIAMI FL 33125

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE

Date

REGISTERED AGENT MUST SIGN

11. 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)(i), 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:

SIGNATURE
AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/16/03

Date

625 638-1756
Daytime Phone #

CR2040 (7/03)



GULMA WHOLESALE, INC.

GENERAL MERCHANDISE

2345 NW 21TH TERRACE * MIAMI, FL. 33142

Phone: (305) 638-1756 * Fax: (305) 638-1241

Website: gulma.com **** E-mail: gulma@bellsouth.net

October/2003

Attn: Annual Report Reinstatement Section

RE: Document # 293084


To whom it may concern,

Gulma Wholesale, Inc. never received it's Annual Uniform Business Report. This company has been in business for many years, and has never had this problem before.

Please issue a waiver for the penalty fees. Enclosed is our check # 2594 for \$ 150.00 to cover the annual report fee of \$61.25, and the \$88.75 *(for each year dissolved).

Thank you for your assistance in this matter.

Sincerely,


Jorge M. Garcia Jr.
Account Executive