

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JAN 25 PM 2:25

DOCUMENT # 586815

1. Corporation Name

G.M.P., **INC.**
C/O TRESCOTT, DRUCKER & VASALLO, P.L.

500065072275
02/02/06--01010--028 **3067.50

2. Principal Office Address

2605 PONCE DE LEON BLVD.

Suite, Apt. #, etc.

City & State

CORAL GABLES, FL

Zip

33134

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 87-06

**4. Date Incorporated or Qualified
To Do Business in Florida**

09/11/1978

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

CHRISTOPHER D. VASALLO, ESQ., TRESCOTT, DRUCKER & VASALLO, P.L.

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

2605 PONCE DE LEON BOULEVARD

Suite, Apt. #, Etc.

City

CORAL GABLES

State

FL

Zip Code

33134

500065072275
02/02/06--01010--029 **88.75

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **DECEMBER 30, 2005**

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/DIR	CHRISTOPHER A. WONG	123-40 83 Avenue #7E	Kew Gardens, NY 11415
SD	MILLCENT WONG	11462 SW 124 Place	Miami, FL 33186
TD	PEARL WONG	11462 S.W. 124 Place	Miami, FL 33186
D	ANDREA WONG	2100 Lee Highway #526	Arlington, VA 22201
D	NATALIE A. WONG	765 Vinca Court	Alpharetta, GA 30005

10. 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:

Christopher A Wong
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/06

Date

Daytime Phone #

CR2E081 (01/05)