

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000001379

FILED
May 11, 2005
Secretary of State

Entity Name: GANDER & WHITE SHIPPING INC.

Current Principal Place of Business:

21-44 44TH ROAD
LONG ISLAND CITY, NY 11101

New Principal Place of Business:

Current Mailing Address:

21-44 44TH ROAD
LONG ISLAND CITY, NY 11101

New Mailing Address:

FEI Number: 13-3318616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATIONSCORP REGISTERED AGENTS, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: ED HAND

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: WHITE, PATRICK
Address: 21-44 44TH ROAD
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: VCVP () Delete
Name: MICKLETHWAITE, STEVE
Address: 21-44 44TH ROAD
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: DS () Delete
Name: CANNON, PAUL
Address: 21-44 44TH ROAD
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: D () Delete
Name: DIVALL, GERALD
Address: 21-44 44TH ROAD
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JAQUE, MICHAEL
Address: 21-44 44TH ROAD
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: LAKE, IAIN
Address: 21-44 44TH ROAD
City-St-Zip: LONG ISLAND CITY, NY 11101

Title: D () Change (X) Addition
Name: PETIT, FRANCIS
Address: 21-44 44TH ROAD
City-St-Zip: LONG ISLAND CITY, NY 11101

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL CANNON

Electronic Signature of Signing Officer or Director

DS

05/11/2005

Date