

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F03000005846

1. Entity Name
GULF MARINE & INDUSTRIAL SUPPLIES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 NOV 21 AM 10:39

Principal Place of Business
401 ST. JOSEPH STREET
NEW ORLEANS, LA 70130

Mailing Address
401 ST. JOSEPH STREET
NEW ORLEANS, LA 70130

REINSTATEMENT 65



11152005 REIN-P CR2E098 (6/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
72-0578340

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KALFOPOULOS, ALEXANDROS
1726 EAST CHURCH STREET
JACKSONVILLE, FL 32202

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2006, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE C ☐ Delete
NAME COTSORADIS, BRILLE
STREET ADDRESS 6026 BELLAIRE DR.
CITY-ST-ZIP NEW ORLEANS, LA 70124

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VC ☐ Delete
NAME COTSORADIS, STEPHEN
STREET ADDRESS 6026 BELLAIRE DR.
CITY-ST-ZIP NEW ORLEANS, LA 70124

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME COTSORADIS, JOHN R
STREET ADDRESS 6026 BELLAIRE DR.
CITY-ST-ZIP NEW ORLEANS, LA 70124

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 14502 RED CREEK CT
CITY-ST-ZIP HUMBLE, TX 77396

TITLE ST ☐ Delete
NAME COTSORADIS, STEPHEN J
STREET ADDRESS 6026 BELLAIRE DR.
CITY-ST-ZIP NEW ORLEANS, LA 70124

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 900061604459
CITY-ST-ZIP 11/21/05--01042--008 **150.00

TITLE D ☐ Delete
NAME BAUER, THOMAS J
STREET ADDRESS 1030 JENA STREET
CITY-ST-ZIP NEW ORLEANS, LA 70115

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME MERRITT, CLYDE
STREET ADDRESS 6661 FLEUR DE LIS DR.
CITY-ST-ZIP NEW ORLEANS, FL 70124

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brille P. Cotsoradis
cotsoradis

11-16-05

Date

504-525-6252

Daytime Phone #

Tel (504) 525-6252
(24 Hr. Service)
Fax (504) 525-4761

GULF MARINE & INDUSTRIAL SUPPLIES, Inc.
20/2

WHOLESALEERS / IMPORTERS

Complete Marine, Mill and Industrial Supplies
Bonded Liquors and Cigarettes

401 Saint Joseph Street
New Orleans, LA 70130
United States of America

Cable Address: Aldemios
Telex: 584224 Gulmar
Email: GulfMarine@USA.Net

November 16, 2005

Florida Department of State
Secretary of State
Glenda E. Hood
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Notice of Dissolution or Revocation
Document #F03000005846

Dear Ms. Hood:

Please find enclosed a completed 2005 For Profit Corporation Reinstatement form, Document #F03000005846. We did not receive the renewal form to file the 2005 annual report and so the filing of the report was overlooked.

Enclosed is our check for the \$150.00 annual fee. We kindly ask that the reinstatement fee be waived since we did not receive the form in the mail.

Should you need additional information, please do not hesitate to contact me.

Sincerely,

Brille R. P. Cotsoradis

Brille R. P. Cotsoradis
Vice-President

Enclosure

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