

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 SEP 29 PM 2:43

DOCUMENT # **F89523**

1. Corporation Name

**G Bino of Dadeland, Inc.**

**REINSTATEMENT**

**05-06**

2. Principal Office Address

**7501 Dadeland Mall**

3. Mailing Office Address

**10205 SW 124th AVE**

Suite, Apt. #, etc.

**Store # 4**

Suite, Apt. #, etc.

City & State

**Miami, FL**

City & State

**Miami, FL**

Zip

**33156**

Country

**USA**

Zip

**33186**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**06/30/82**

5. EEI Number

**59-2200612**

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

**Gaetano Gambino**

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

**10205 SW 124th AVE**

Suite, Apt. #, Etc.

City

**Miami**

State

**FL**

Zip Code

**33186**

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

*[Signature]*

Date

**9/26/06**

REGISTERED AGENT MUST SIGN

**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
PD	Gaetano Gambino	10205 SW 124th AVE	Miami, FL 33186

600080307716  
09/29/06--01051--022 \*\*300.00

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 contained in Chapter 119, 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]*

**Gaetano Gambino**

**9/26/06**

Date

**305-710-8007**

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 of 2

September 25, 2006

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

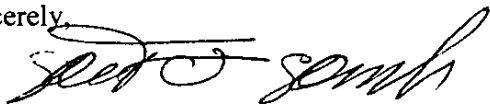
Ref: Reinstatement of G Bino of Dadeland Inc. for 2005 & 2006 - FEID: 59-2200612

To Whom It May Concern:

I am by this letter respectfully requesting that the reinstatement fee of \$600 be waived as I did not receive the annual report notices. The mailing address that you have in your system is the address of my former accountant who went out of business two years ago and is no longer my accountant. Therefore, I did not get the notices.

I am including a check for \$300 to reinstate the company and file the annual reports for 2005 and 2006. I would appreciate it if you can reinstate the company as soon as possible. Thank you for your prompt assistance regarding this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Gaetano Gambino", written in a cursive style.

Gaetano Gambino