

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 SEP 14 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000003398

1. Corporation Name

GFI REALTY SERVICES, INC.

Principal Place of Business

Mailing Address

50 Broadway, Sixth Floor
New York, New York 10004

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

2. Last Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

7/26/93

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

13-3697224

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

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

Name	Name of Officers and/or Directors	3	4
		Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
Pres. & Sect.	Edith Gross	50 Broadway, 6th Floor	New York, New York 10004
Vice.	Abraham Eisner	50 Broadway, 6th Floor	New York, New York 10004
Pres.			
Treas.	Leif Karlsson	50 Broadway, 6th Floor	New York, New York 10004

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****908.75 ****908.75

8. Name and Address of Current Registered Agent

Prentice Hall
1201 Hayes Street
Tallahassee, Florida 32307

9. Name and Address of New Registered Agent

Name

JERRY JOSEPH

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

100 GOLDEN ISLES DRIVE

Suite, Apt. #, Etc.

SUITE 1204

City

HALLANDALE BEACH

State

FL

Zip Code

33009

10. I, the undersigned, being the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

JERRY JOSEPH

Date SEPT. 01, 1999

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I, the undersigned, being an officer or director of 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 payable 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.

KE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Abraham Eisner, Vice president

9/7/99

Date

(212)837-4641

Daytime Phone #