

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # F96130

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1. Corporation Name

THE GILDER SHOP PAWN BROKER, INC.

Principal Place of Business

Mailing Address

611 W. BRANDON BLVD.  
BRANDON FL 33511

611 W. BRANDON BLVD.  
BRANDON FL 33511



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

08/16/1982

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2620820

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

33511

USA

33511

USA

CERTIFICATE OF STATUS DESIRED

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
CPD	FAIVRE, ROGER	2711 WASHINGTON RD	VALRICO FL
			400003459224--7
			11/09/00 01000 019
			****158.75 ****158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FAIVRE, ROGER P.  
607 W. BRANDON BLVD  
BRANDON FL 33511

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

10. I, being appointed 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

Roger P. Faivre  
REGISTERED AGENT MUST SIGN

Date 10/12/2000

11. 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: Roger P. Faivre  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date 10/12/2000  
Daytime Phone # 813-689-4231