

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H62905

FILED  
Feb 01, 2005  
Secretary of State

Entity Name: L. & G. MERCHANDISE SOUTH, INC.

**Current Principal Place of Business:**

PO BOX 151717  
CAPE CORAL, FL 33915

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 151717  
NORTH FT. MYERS, FL

**New Mailing Address:**

FEI Number: 59-2546584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOLDSTEIN, LOUIS  
208 SE 37TH LANE  
CAPE CORAL, FL 33904 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: LAWRENCE SWAN

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GOLDSTEIN, LOUIS R.,  
Address: 203 SE 37TH LANE  
City-St-Zip: CAPE CORAL, FL 33904

Title: VS ( ) Delete  
Name: GOLDSTEIN, MARCIA  
Address: 203 SE 37TH LANE  
City-St-Zip: CAPE CORAL, FL 33904

Title: ST ( ) Delete  
Name: GOLDSTEIN, MARCIA,  
Address: 203 SE 37TH LANE  
City-St-Zip: CAPE CORAL, FL 33904

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: LOUIS GOLDSTEIN

PD

02/01/2005

Electronic Signature of Signing Officer or Director

Date