2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000001130

FILED Dec 17, 2007 Secretary of State

Entity Name: GAMBIAN ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:		New Principal Place of Business:	New Principal Place of Business:	
	RALD LAKE DR R, FL 33023			
Current Mailing Address:		New Mailing Address:		
6640 EMERALD LAKE DR MIRAMAR, FL 33023		P O BOX 693307 MIAMI, FL 33269		
n accordan	r: 27-0137218 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation di	d not receive the prior notice.	ed ()	
Name and	d Address of Current Registered Agent	Name and Address of New Registered Agent:		
NICOL, MICHAEL 6640 EMERALD LAKE DR MIRAMAR, FL 33023 US		SOCK, GEORGE 6640 EMERALD LAKE DR MIRAMAR, FL 33023 US		
The above in the State	e named entity submits this statement for the of Florida.	ne purpose of changing its registered office or registered agent,	or both,	
SIGNATU	RE: GEORGE SOCK	12/17/2007		
	Electronic Signature of Registered	Agent Date		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DI	RECTOR	
Title: Name: Address: City-St-Zip:	C () Delete SOCK, GEORGE 1931 NW 52ND CT MIAMI, FL 33055	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	VC () Delete NJIE, NJEMEH 1265 SW 101 TERRACE - 103 MIRAMAR, FL 33025	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	VC () Delete NJIE, FRANCIS N 2292 SW 125TH AVE MIRAMAR, FL 33027	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	T () Delete NICOL, MICHAEL 6640 EMERALD LAKE DR MIRAMAR, FL 33023	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	S () Delete JAITEH, MIRIAMA 6640 EMERALD LAKE DR MIRAMAR, FL 33023	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete CONTEH, LISA 3468 FOXCROFT RD - 305 MIRAMAR, FL 33025	Title: () Change () Addition Name: Address: City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE SOCK P 12/17/2007