

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N99000001696 1. Entity Name POLISH MISSION FOUNDATION, INC.	
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FILED
 06 NOV 15 AM 10:44
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business ATTN: MICHAEL F. GASTOM 1431 SOUTH OCEAN BLVD # 56 20 LAUDERDALE BY THE SEA, FL 33062	Mailing Address ATTN: MICHAEL F. GASTOM 1431 SOUTH OCEAN BLVD # 56 20 LAUDERDALE BY THE SEA, FL 33062
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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10242006 REIN-NP	CR2E099 (1005) 1006
4. FEI Number 68-0904258	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GASTOM, MICHAEL F 1431 SOUTH OCEAN BLVD. # 56 20 LAUDERDALE BY THE SEA, FL 33062	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

EVERYTHING THE SAME, CHANGE FROM 56 TO 20

SIGNATURE *Michael F. Gastom* DATE 11-12-06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$236.25 After January 1, 2007, Fee will be \$297.50		Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> Delete CIEPLAK, URSZULA 310 S OCEAN BLVD #406 BOCA RATON, FL 33432
TITLE	VP <input type="checkbox"/> Delete OLSZEWSKI, JERRY 3420 NE 16TH ST #5 POMPANO BEACH, FL 33062
TITLE	T <input type="checkbox"/> Delete GASTOM, MICHAEL 1431 S OCEAN BLVD # 56 20 LAUDERDALE BY THE SEA, FL 33062
TITLE	S <input checked="" type="checkbox"/> Delete DABROWSKI, ZOFIA 3150 PALM AIRE DR POMPANO BEACH, FL 33069
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Addition 900081790700
STREET ADDRESS	11/15/06--01019--013 **297.50
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SKATARZYNA ZIELINSKI
STREET ADDRESS	670 N.E. 56TH COURT
CITY-ST-ZIP	FT. LAUDERDALE, FL. 33334
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael F. Gastom* (MICHAEL F. GASTOM) DATE 11/12/06 DAYTIME PHONE # 954-942-4811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #