

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000003835

FILED
Dec 07, 2005
Secretary of State

Entity Name: GOLDEN GATE BARBERS & SALON, INC.

Current Principal Place of Business:

2205 COLLIER BLVD.
NAPLES, FL 34116

New Principal Place of Business:

11985 COLLIER BLVD.
NAPLES, FL 34116

Current Mailing Address:

2205 COLLIER BLVD.
NAPLES, FL 34116

New Mailing Address:

11985 COLLIER BLVD.
NAPLES, FL 34116

FEI Number: 59-3619547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZANTA, JOE
2205 COLLIER BLVD
CR 951
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

ZANTA, JOE
11985 COLLIER BLVD
NAPLES, FL 34116 US

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: JOE ZANTA

12/07/2005

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: D () Delete
Name: ZANTA, JOE
Address: 2205 CR 951
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ZANTA, JOE
Address: 11985 COLLIER BLVD.
City-St-Zip: NAPLES, FL 34116

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: JOE ZANTA

D

12/07/2005

Electronic Signature of Signing Officer or Director

Date