

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P00000035816

Entity Name: GORMI, CORP.

**FILED**  
**Feb 20, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

9835 SUNSET DRIVE  
#103  
MIAMI, FL 33173

**New Principal Place of Business:**

5887 NW 36 ST  
VIRGINIA GARDENS, FL 33166

**Current Mailing Address:**

9835 SUNSET DRIVE  
#103  
MIAMI, FL 33173

**New Mailing Address:**

5887 NW 36 ST  
VIRGINIA GARDENS, FL 33166

FEI Number: 65-1098653

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SALAZAR, MIGUEL A DPS  
9835 SUNSET DR  
103  
MIAMI, FL 33173 US

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

SALAZAR, MIGUEL A DPS  
5887 NW 36 ST  
VIRGINIA GARDENS, FL 33166 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: MIGUEL SALAZAR

02/20/2008

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: DPS ( ) Delete  
Name: SALAZAR, MIGUEL  
Address: 9835 SUNSET DRIVE  
City-St-Zip: MIAMI, FL 33173

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

Title: DPS (X) Change ( ) Addition  
Name: SALAZAR, MIGUEL  
Address: 5887 NW 36 ST  
City-St-Zip: VIRGINIA GARDENS, FL 33166

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIGUEL SALAZAR

DPS

02/20/2008

Electronic Signature of Signing Officer or Director

Date