

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 SEP -1 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 00000049895

1. Corporation Name

G AND B Real Estate Holding
Company

400040725554
09/01/04--01019--005 **300.00

2. Principal Office Address

2450 Hollywood Blvd
Suite, Apt. #, etc.
102

3. Mailing Office Address

2450 Hollywood Blvd
Suite, Apt. #, etc.
102

City & State

Hollywood

City & State

Hollywood

Zip

33020

Country

Florida

Zip

33020

Country

Florida

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida**

5/19/2000

5. FEI Number

593652797

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Raul Garmendia

Street Address (P.O. Box Number is Not Acceptable)

2450 Hollywood Blvd

Suite, Apt. #, Etc.

102

City

Hollywood

State

FL

Zip Code

33020

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 8/30/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P.	Raul M Garmendia	2450 Hollywood Blvd	Suite 102 Hollywood FL 33020
D.	Raul J Garmendia	3050 Palm Aire Dr N.	109 Pompano Beach FL 33069
S	Raul M Garmendia	2450 Hollywood Blvd	Suite 102 Hollywood, FL
D	Raul M Garmendia		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

8/30/04 9549251082

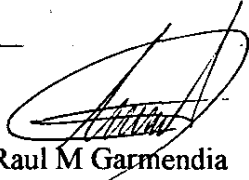
Daytime Phone #

CR2ED01 (01/04)

PS 282

Miami 8-30-04
Department of State
Division of Corporation.

I Raul M Garmendia never receive the annual reports; since I have too many companies I did not file it on time. Thanks

A handwritten signature in black ink, appearing to read "Raul M Garmendia", is written over a horizontal line.

Raul M Garmendia