

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 MAR 17 AM 10:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000113091

**1. Corporation Name**

G + L INVESTORS INC.

**2. Principal Office Address**

6207 N.W. 66th WAY

Suite, Apt. #, etc.

City & State

Parkland, FL

Zip

33067

Country

Broward

**3. Mailing Office Address**

6207 N.W. 66th WAY

Suite, Apt. #, etc.

City & State

Parkland, FL

Zip

33067

Country

Broward

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

**5. FEI Number**

65-1112191

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

ALLEN, LORENZO

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

6207 N.W. 66th

Suite, Apt. #, Etc.

City

Parkland

State

FL

Zip Code

33067

**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

Lorenzo A. Allen

REGISTERED AGENT MUST SIGN

Date 21 Feb 2003

**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
<u>P</u>	<u>ALLEN, LORENZO</u>	<u>6207 N.W. 66th way</u>	<u>Parkland, FL 33067</u>
<u>V</u>	<u>BYNES, George</u>	<u>1913 S.W. 66th AVE.</u>	<u>Pompano Beach FL 33068</u>

**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:

Lorenzo A. Allen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

21 Feb 2003

Date

Daytime Phone #

TO WHOM IT MAY CONCERN.

I DID NOT KNOW I HAD TO FILE A UNIFORM BUSINESS REPORT EVERY YEAR. I NEVER RECEIVE ONE .SO I AM SENDING A CHECK FOR \$300.00

THANK YOU

LORENZO A. ALLEN

HOME (954) 796-2198

CELL (954) 424-9361

*Lorenzo A. Allen*