

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 28 PM 12:47

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # **P01000015211**

1. Corporation Name

**GAMERO LOPEZ PROPERTY CORPORATION**

Principal Place of Business

5205 ALTON ROAD  
MIAMI BEACH FL 33140

Mailing Address

5205 ALTON ROAD  
MIAMI BEACH FL 33140

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 03

02/08/2001

5. FEI Number

65-1073903

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	GAMERO, FRANKLIN	5205 ALTON ROAD	MIAMI BEACH FL 33140
D	LOPEZ, ILEANA	5205 ALTON ROAD	MIAMI BEACH FL 33140

200024188442  
10/28/03--01013--019 \*\*150.00

8. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.  
941 FOURTH STREET #200  
MIAMI BEACH FL 33139

9. Name and Address of New Registered Agent

Name

Franklin Gamero

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

5205 Alton Rd.

Suite, Apt. #, Etc.

Miami Beach

City

Miami Beach

State

FL

Zip Code

33140

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

*Franklin Gamero*  
REGISTERED AGENT MUST SIGN

Date 10/24/03

11. 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:

*Franklin Gamero*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/24/03

Daytime Phone #

(786) 514-0687

CR20040 (7/03)

Gamero Lopez Property Corporation  
5205 Alton Road  
Miami Beach, FL 33140  
October 24, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

We are enclosing a completed Application of Reinstatement for the Gamero Lopez Property Corporation (FEI number 65-1073903). Since we had an out of town business commitment for several weeks, we had requested that an associate pay the \$150 renewal fee for us during our absence. Upon returning from our trip, however, we learned that this associate had unfortunately not submitted the fee for us.

We therefore respectfully request your consideration in accepting the renewal fee of \$150 with this completed application. We apologize for the oversight and promise to maintain a more alert vigil in the future.

If you have any questions, please contact me at (305) 864-7596

Sincerely,

  
Franklin Gamero, Iliana Lopez