

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000025952

Entity Name: G CUBED, INC.

FILED
Feb 14, 2006
Secretary of State

Current Principal Place of Business:

155 BAREFOOT COVE
HYPOLUXO, FL 33462

New Principal Place of Business:

Current Mailing Address:

123 LAS BRISAS CIRCLE
HYPOLUXO, FL 33462

New Mailing Address:

155 BAREFOOT COVE
HYPOLUXO, FL 33462

FEI Number: 65-1083922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASPARINI, GREGOIRE
155 BAREFOOT COVE
HYPOLUXO, FL 33462 US

Name and Address of New Registered Agent:

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: GREGOIRE GASPARINI

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: P () Delete
Name: GASPARINI, GREGOIRE G
Address: 155 BAREFOOT COVE
City-St-Zip: HYPOLUXO, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GREGOIRE GASPARINI

PRES

02/14/2006

Electronic Signature of Signing Officer or Director

Date