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FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

03 MAR 20 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
[redacted]
Secretary of State
DIVISION OF CORPORATIONS

2003 UBR

DOCUMENT # P01000029222

1. Corporation Name
GDC Group, INC.
~~P01000029222~~

900014901859
03/28/03--01018--007 **308.75

2. Principal Office Address	3. Mailing Office Address
17100 NE 19th Av.	17100 NE 19th Av.
Suite, Apt. #, etc.: 100	Suite, Apt. #, etc.: same
City & State: N. Miami Beach, FL	City & State:
Zip: 33162 Country: USA	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 3/21/01

5. FEI Number: 65-1123374 — 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: HERBERT DEITCH
Street Address (P.O. Box Number is Not Acceptable): 17100 NE 19th Av.
Suite, Apt. #, Etc.: 100
City: N. Miami Beach, FL 33162
State: FL Zip Code: 33162

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

Signature of Registered Agent: X [signature] REGISTERED AGENT MUST SIGN
Date: 3/18/03

CR2E001 (1/01)

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
PRES	HERBERT DEITCH	17100 NE 19th Av.	N. Miami Beach FL 33162
V.P.	CARLO MUTTI	17100 NE 19th Av	N. Miami Beach FL 33162

02-03 UBR

10. I certify that I am an officer or director of 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 nominees 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: X [signature] 3/18/03 (305) 949-5355
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

HERBERT DEITCH

CDC GROUP, INC.
17100 NE 19 AV. , NORTH MIAMI BEACH, FL. 33162
Phone: (305)949-5355 Fax: (305)947-8510

3/18/03

FLORIDA DEPT. OF STATE
DIVISION OF CORPORATIONS
409 EAST GAINES ST
TALLAHASSEE, FL 32399

ATTN: DIVISION OF CORPORATIONS

PLEASE BE ADVISED THAT CDC GROUP, INC. DID NOT RECEIVE IT'S 2002 ANNUAL REPORT. PLEASE CORRECT THE MAILING AND PRINCIPLE ADDRESS TO: 17100 NE 19TH AV. N. MIAMI BEACH, FL. 33162 STE. 100 AND ISSUE A CERTIFICATE OF GOOD STANDING FOR CDC GROUP, INC. AND REINSTATE THIS CORPORATION.

THANK YOU,

HERBERT DEITCH
PRESIDENT