

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 NOV -8 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000039366

1. Corporation Name

GLOBAL INFORMATION TECHNOLOGY CONSULTING, INC.

6104 NW 114TH PLACE

2. Principal Office Address

6104 NW 114TH PLACE

3. Mailing Office Address

Suite, Apt. #, etc.

211

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

Zip

33178

Country

Zip

Country

4. Date Incorporated or Qualified

To Do Business in Florida 04/18/2001

5. FEI Number

65-1114455

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 04

7. Name and Address of Current Registered Agent

Name

EDMUNDO GARZON

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

6104 NW 114TH PLACE

Suite, Apt. #, Etc.

211

City

MIAMI

State

FL

Zip Code

33178

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

[Signature]

Date

REGISTERED AGENT MUST SIGN

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/D	JARVIER GARZON	6104 NW 114TH PLACE, # 211	MIAMI, FL. 33178.
V/P	EDMUNDO GARZON	6104 NW 114TH PLACE, # 211.	MIAMI, FL. 33178.

12/15

200042559212
11/08/04--01053--007 **158.75

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:

X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)

**GLOBAL INFORMATION TECHNOLOGY CONSULTING,
6104 NW 114TH PLACE, SUITE 211
MIAMI, FL. 33178.**

Miami Florida

November 3rd, 2004

Florida Department of State
Division of Corporation.
P. O. Box 6327
Tallahassee, Fl. 32314

Re: 2004 Uniform Business Report

**GLOBAL INFORMATION TECHNOLOGY CONSULTING
RE: P01000039366**

Dear Sir;


Enclosed please find 2004 UNIFORM BUSINESS REPORT for the annual Corporate Report. Enclosed is my ck. # 1284 for the amount of \$158.75, to paid the above Annual fee and for year 2004.

Please accept this payment as of today, because I never got any report from the Division of Corporation at this time. Also note that we have changed our address to 6104 N.W. 114th Place, suite 211, Miami, Florida 33178.

If you need any more information please do not hesitate to contact me.

Sincerely yours,

GLOBAL INFORMATION TECHNOLOGY CONSULTING


EDMUNDO GARZON.
President.