

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 AUG 16 PM 4:21

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000052373**

1. Corporation Name

**G & B ENGINEERING
ENTERPRISES INC.**

2. Principal Office Address

3675 N. COUNTRY

Suite, Apt. #, etc.

CLUB DR.

#1807

City & State

MIAMI, FLA.

Zip

33301

Country

DADE

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 05-06
CR2E081 (12/05)

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

5. FEI Number

65-1110185

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

GRACIELA BRACACCINI

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

3675 N. COUNTRY CLUB DR.

Suite, Apt. #, Etc.

1807

City

MIAMI, FL.

State

FL

Zip Code

33301

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]

REGISTERED AGENT MUST SIGN

Date

08/02/06

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.	BRACACCINI, GRACIELA	3675 N. COUNTRY CLUB DR.	MIAMI, FL.
		#1807	33301

90079128109
08/25/06--01032--012 **300.00

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 contained in Chapter 119, 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:

[Signature]

PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/02/06

Date

Daytime Phone #

954-562-

0082

2072

**G & B ENGINEERING ENTERPRISES, INC.
3675 N. COUNTRY CLUB DR.
UNIT 1807
MIAMI, FLORIDA 33301
954-562-0082**

August 2, 2006

**Secretary of State
Division of Corporation
P. O. Box 6327
Tallahassee, Florida 32314**

To Whom It May Concern:

Attached you will find the reinstatement form for my corporation. I do not know what happened but I did not receive the card that you supposedly sent out. I do a lot of traveling out of the country and in these periods the mail does have problems at my location.

Attached is the reinstatement form and the payment for last year and this year.

Thank for your understanding.


Graciela Braccacini, Pres.