

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 29 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000052735

1. Corporation Name

Gilbert Exposition Management Services, Inc

2. Principal Office Address

11461 S Orange Blossom Tra

Suite, Apt. #, etc.

Suite 5

City & State

Orlando, Florida

Zip

32837

Country

USA

3. Mailing Office Address

11461 S Orange Blossom Trai

Suite, Apt. #, etc.

Suite 5

City & State

Orlando, Florida

Zip

32837

Country

USA

REINSTATEMENT 03

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

05/21/2001

5. FEI Number

593543480

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

John Gillen

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

2314 Holly Ridge Dr

Suite, Apt. #, Etc.

City

Ocoee

State

FL

Zip Code

34761

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

John Gillen

REGISTERED AGENT MUST SIGN

Date 10/15/03

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
PSD	Ken Gilbert	11461 S ORnage Blossom Trail	Orlando, Florida 32837

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:

Ken Gilbert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/15/03

Date

407-438-5002

Daytime Phone #

CR2E081 (10/02)

211/3



exposition
management
services

October 28, 2003

Division of Corporations
Florida Department of State
5050 W Tennessee
Tallahassee, Florida 32399

Re: Document # P01000052735

Dear Sir or Madam:

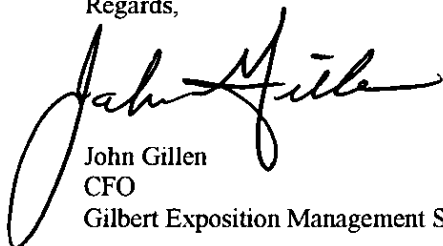
This letter is in reference to the reinstatement of the 2003 Annual Report for the above document number.

As you can see from the enclosed copy of the Public Inquiry of the Corporations Online Documents, the mailing address for this corporation wasn't change when we summated our Annual Report in 2002. However, all of the other addresses were change, but we never received of the original Annual Report for 2003 because of the mailing address not being changed. Nor did our Registered Agent receive a copy of the Notice of Adminiserative Dissolution form the State.

Per your instructions online and in your voice message system, we have completed a Reinstatement form and have enclosed a chck for \$150.00 for the current year filing fees.

If you have any question please feel free to call me at 407-782-5355.

Regards,



John Gillen
CFO
Gilbert Exposition Management Services, Inc.