

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLI


APPROVED  
AND  
FILED

05 APR 28 PH 4:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT** 02-05  
MRD

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # PO1000 115285

1. Corporation Name  
GSG Marketing, Inc.  
16071 Villa Vizcaya Place  
Delray Beach FL 33446

2. Principal Office Address 16427 Brookfield Estates Way Suite, Apt. #, etc.	3. Mailing Office Address 16427 Brookfield Estates Way Suite, Apt. #, etc.
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City & State Delray Beach FL	City & State Delray Beach FL
Zip 33446	Country U.S.
Zip 33446	Country U.S.

4. Date Incorporated or Qualified To Do Business in Florida 12/3/01

5. FEI Number 75-2972555 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  
Sheldon Golub

Street Address (P.O. Box Number is Not Acceptable)  
16427 Brookfield Estates way

Suite, Apt. #, Etc.

City  
Delray Beach

State  
FL

Zip Code  
33446

000054670140  
05/17/05-01033-019 \*\*\*1200.00

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 Sheldon Golub REGISTERED AGENT MUST SIGN

Date 4/22/05

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	Sheldon Golub	16427 Brookfield Estates way	Delray Beach FL 33446

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: Sheldon Golub 4/22/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (01/05)