

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -7 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000012234

1. Corporation Name

Chris GEMM Group Inc.

2. Principal Office Address

881 Nevada Dr.

Suite, Apt. #, etc.

Private house

City & State

Palm Bay Fl.

Zip

32907

Country

USA

3. Mailing Office Address

881 Nevada Dr. NE.

Suite, Apt. #, etc.

Private house

City & State

Palm Bay Fl.

Zip

32907

Country

USA.

REINSTATEMENT 03

900024508999

11/07/03--01050--019 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

1-28-02

5. FEI Number

743033401

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

Gisselle Bayron

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

881 Nevada Dr. NE.

Suite, Apt. #, Etc.

Palm Bay Fl.

City

State

FL

Zip Code

32907

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

Gisselle Bayron

REGISTERED AGENT MUST SIGN

Date

10-30-03

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
Dr	Gisselle Bayron	881 Nevada Dr. NE.	Palm Bay Fl. 32907

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:

Gisselle Bayron

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-30-03

Daytime Phone #

321-
409-9194

CR2E001 (10/02)

To whom it may Concern,

I spoke to one of your Acct.
Reps. and Explained that I
haven't received a renewal form,
since I requested for corp. I
moved and never got anything
at my new address, he advised
me to send a \$150.⁰⁰ check and
this note explaining I had
moved.

Thank you

Gisselle Bayron
881 Nevada Dr.
Palm Bay FL 32907
321-409-9144

✓