2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 20, 2004
Secretary of State

DOCUMENT# P02000039849

Entity Name: G. PLANTS, INC.

Current Principal Place of Business:

1950 NW TENTH TERRACE
HOMESTEAD, FL 33030

New Principal Place of Business:

P.O. BOX 900999
HOMESTEAD, FL 33090

Current Mailing Address:

1950 NW TENTH TERRACE
HOMESTEAD, FL 33030

New Mailing Address:

P.O. BOX 900999
HOMESTEAD, FL 33090

FEI Number: 71-0878993 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAAS, JOHN P ESQ
44 NE 16 STREET
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GARRISON, DONOVAN SEAN
Address: 1950 NW TENTH TERRACE
City-St-Zip: HOMESTEAD, FL 33030

Title: D ( ) Delete
Name: GARRISON, JENNIFER NOEL
Address: 1950 NW TENTH TERRACE
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: GARRISON, DONOVAN SEAN
Address: P.O. BOX 900999
City-St-Zip: HOMESTEAD, FL 33090

Title: D (X) Change ( ) Addition
Name: GARRISON, JENNIFER NOEL
Address: P.O. BOX 900999
City-St-Zip: HOMESTEAD, FL 33090D

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JENNIFER N. GARRISON D 10/20/2004

Electronic Signature of Signing Officer or Director Date