

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 MAR -7 AM 9:13

DOCUMENT # P02000042189

1. Corporation Name

GSR & CO Inc

2. Principal Office Address

1981 NE 185th Terrace

Suite, Apt. #, etc.

City & State

North Miami Beach

Zip

33179

Country

USA

3. Mailing Office Address

1981 NE 185th Terrace

Suite, Apt. #, etc.

City & State

North Miami Beach

Zip

33179

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

4/18/02

5. FEI Number

35-2167319

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

700068110077  
03/20/06--01024--028 \*\*1050.00  
CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

GABINO SERRANO

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

1981 NE 185th Terrace

Suite, Apt. #, Etc.

City

North Miami Beach

State

FL

Zip Code

33179

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

REGISTERED AGENT MUST SIGN

Date 03/01/2006

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
D	GABINO SERRANO	1981 NE 185th Terrace	North Miami Beach FL 33179
D	Jorge Serrano	1981 NE 185th Terrace	North Miami Beach FL 33179
VP	MARIA BAUTISTA SERRANO	1981 NE 185th Terrace	North Miami Beach FL, 33179

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GABINO SERRANO

Date

03/01/2006 786-487-7985

Daytime Phone #