

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

04 JUN 28 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P020 000 63625

**1. Corporation Name**

G & M RESTORATION AND PRESERVATION, INC

**2. Principal Office Address**

3126 Houndsworth Ct

Suite, Apt. #, etc.

205

City & State

Orlando, FL

Zip

32837

Country

Orange

**3. Mailing Office Address**

Same

Suite, Apt. #, etc.

Same

City & State

Same

Zip

32837

Country

Orange

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

**5. FEI Number**

04-3691125

☒ 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

ContaxGonzalez Service Corp

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

4142 W. Oakridge Rd

Suite, Apt. #, Etc.

102

City

Orlando

State

FL

Zip Code

32809

**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 04/21/2004

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| p      | Gustavo A. Castrillon                | 3126 Houndsworth Ct # 205                         | Orlando, FL 32837  |
| V      | Marthe M. Rivera                     | 3126 Houndsworth Ct # 205                         | Orlando, FL 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/21/2004

Date

321-663-7820

Daytime Phone #

13 202

Orlando, FL April 21, 2004

TO:  
Uniform Business Report  
Division of Corporations

FROM:  
C & M Restoration and Preservation, Inc  
3126 Houndsworth Ct # 205  
Orlando, FL 32837

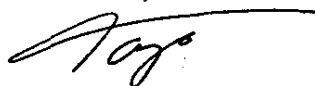
Dear Sir:

Our company was created in June 07 2002. As a President of my company, I did not have knowledge regarding to the annual report to be sent to your office neither, I received the UBR form to be filled out by us.

I would like to ask you, to please consider this situation. Due to my economical difficulties at this time, and the high penalty to be pay, I will not be able to paid such amount

I will promise this is not going to happen again.

Sincerely,



Gustavo Castrillon  
President