

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000117691

1. Corporation Name

G.D.P. LIBRARY & BOOKSTORE, INC.

Principal Place of Business

Mailing Address

13926 SW 47TH ST.  
MIAMI FL 33175

13926 SW 47TH ST.  
MIAMI FL 33175

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

13940 SW 47 ST

13940 SW 47 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
MIAMI, FL

City & State  
MIAMI, FL

Zip  
33175

Country  
USA

Zip  
33175

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida

11/01/2002

5. FEI Number

47-0898581

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	ANTONIO MATTIA	13901 SW 2ND ST	MIAMI, FL 33184
V	MICHAEL A. MATTIA	" " "	" " "
S	ELVA MATTIA	" " "	" " "
T	MARC A. MATTIA	15365 SW 104 TERR. UNIT 3	MIAMI, FL 33196
REINSTATEMENT			

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GREEN, JERRY  
9200 SOUTH DADELAND BLVD., SUITE 700  
MIAMI FL 33156

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/17/03

11. 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

Date

10/16/03

Daytime Phone #

CR2E040 (7/03)

2012

October 16, 2003

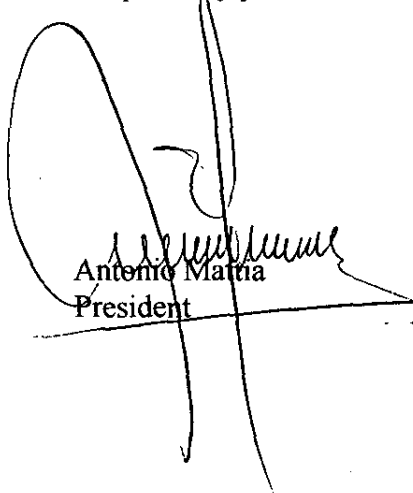
Florida Department of State  
Division of Corporations  
Annual Report/Reinstatement Section  
PO Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

This letter will serve to certify that G D'P Library & Bookstore, Inc., a Florida corporation, did not receive the **two prior uniform business report (UBR) notices**. In accordance with the information printed on the enclosed Application for Reinstatement, non-receipt of the two prior notices qualifies G D'P Library & Bookstore, Inc. for waiving of the reinstatement fee. We ask that this fee be waived.

Thank you for your attention and assistance.

Respectfully yours,



Antonio Mattia  
President