

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT -2 AM 8:00

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000135122

1. Corporation Name

Gunhill Enterprises, Inc.

2. Principal Office Address

1850 West McNab Road

Suite, Apt. #, etc.

3. Mailing Office Address

1850 West McNab Road

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33309

Country

USA

Zip

33309

Country

USA

4. Date incorporated or Qualified
To Do Business in Florida

12/27/2002

5. FEI Number

75-3114347

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

800023868138
10/17/03--01005--026 **750.00
REINSTATEMENT 03

7. Name and Address of Current Registered Agent

Name

Frank F. Ferola

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

1850 West McNab Road

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State
FL

Zip Code
33309

MRS

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 October 1, 2003

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
P/D	Frank F. Ferola	1850 W. McNab Rod	Ft. Lauderdale, FL 33309
VIS/IT/D	Thomas M. D'Ambrosio	10777 W. Sample Road, Apt. 614	Coral Springs, FL 33065
D	Shouky A. Shaheen	3625 Cumberland Blvd., Suite 250	Atlanta, GA 30339
D	John DePinto	236 River Park Drive	Jupiter, FL 33477

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

Frank F. Ferola, President

10/1/03

(954) 971-0600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)