

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000021048

FILED
Oct 16, 2004
Secretary of State

Entity Name: GNS DELIVERY SERVICES, CORP.

Current Principal Place of Business:

2725 NW 169TH TERRACE
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

2725 NW 169TH TERRACE
MIAMI, FL 33056

New Mailing Address:

FEI Number: 48-1300464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLART, MIRLE
2725 NW 169TH TERRACE
MIAMI, FL 33056 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GALLART, MIRLE
Address: 2725 NW 169TH TERRACE
City-St-Zip: MIAMI, FL 33056

Title: VP () Delete
Name: DIAZ, ALBERTO
Address: 1825 SW 72ND COURT
City-St-Zip: MIAMI, FL 33155

Title: SECR () Delete
Name: GALLART, JACQUELINE
Address: 2725 NW 169TH TERRACE
City-St-Zip: MIAMI, FL 33056

Title: TREA () Delete
Name: GALLART, WILFREDO
Address: 2725 NW 169TH TERRACE
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JACQUELINE GALLART

SEC

10/16/2004

Electronic Signature of Signing Officer or Director

Date