## 2005 FOR ₱RGFIT CORPORATION REINSTATEMENT

		17511401	~				• ;		:	
DOCUMENT # P03000059116  1. Entity Name G&S ENTERPRICE INCORPORATED							PM 12: 17			
						\$6	ATE			
Principal Plac	e of Business		Mailing Address	Mailing Address			_,   LORIDA		86.00	
2422 ISLANI			2422 ISLAND CLUB WAY				· · · · · · · · · · · · · · · · · · ·			
ORLANDO, FL 32822 ORLANDO, FL 32822						NO HOUSE	5.3.M. (1)	اسنال السنال	05	
					_1947					
2. Principal P	Place of Busine	ess	3. Mailing Address							
Suite, Apt.	. #, etc.	· · · · · · ·	Suite, Apt. #, etc.			12062005	REIN-P	CR2E098	(6/04)	
City & Stat	te		City & State			4. FEI Numb 91-218		,	Applied For Not Applicable	
Zip I	Zip Country		Zìp			5. Certificate	of Status Desired		<b>75</b> Additional Required	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name				
	z, FELIX G									
	ND CLUB 1 D. FL 3282			Street Address (P.O. Box Number is Not Acceptable)						
637	J, I L 0202	-								
								FL Z	Zip Code	
8. The above	named entity	submits this statement	for the purpose of changing it	ered agent, or bo	th, in the State of Flo	orida. I am famili	ar with, and accept			
: 4 the obligations of registered agent.										
SIGNATURE,	Signature, typed o	or printed name of registered age	nt and title if applicable. (NO	TE: Register	ed Agent signature requ	ired when reinstating		DATE +1		
Signature, typed or printed name of registered agent and title if applicable.  [NOTE: Registered Agent signature required when reinstating)  2. [								L .		
FILE NOW!!! FEE IS \$150.00							In accordance v corporation did	vith s. 607.193	(2)(b) P.S. the	
—— After January 1, 2006, Fee will be \$300.00								-4 -	(6/04)	
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12. I horeby	certify that the	information supplied wi	th this filing does not qualify f	—	-ST-ZIP	ection 110 07(2)	(i) Florida Statutas	further certify th	at the information	
12. I horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information this indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under or other that my name appears in Block 10 or Block 11 if										
changed, or on an attachment with an address with all other like empowered.										
12. I horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutos. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if shanged, or on an attachment with an address with all other like empowered.  SIGNATURE:										