

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04000018511

Corporation Name
 GBI Holdings, Inc.

FILED

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SECRETAL
TALLAHASNEE, FLUADA

		7. Name	and Address of Current	Registered Agent	
Zip 34711	Country Lake	^{Zip} 34711	Country Lake		.75 Additional Fee require for a Certificate of Status
77-	T A		A	71-0996985	Not Applicable
Clermont, Florida		Clermont, Florida		5. FEI Number	Applied For
City & State		City & State		4. Date Incorporated or Qualified 1/29/2004 To Do Business in Florida	
2. Principal Office 13030 Suga		3. Mailing Office 13030 Suga		HARINSTATEME	MI 05-0

Name Steve Nichols

Street Address (P.O. Box Number is Not Acceptable)
13030 Sugarbluff Rd.

Suite, Apt. #, Etc.

City Clermont

State FL Zip Code 34711

8. 1, 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	SENT MUST SIGN Steve Nichols	Date 2 11 06			
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			
Presiden	t Steve Nichols	13030 Sugarbluff Rd.	Clermont, Florida 34711			
VP	Steve Nichols	13030 Sugarbluff Rd.	Clermont, Florida 34711			
Secretar	y Steve Nichols	13030 Sugarbluff Rd.	Clermont, Florida 34711			
Treasure	Steve Nichols	13030 Sugarbluff Rd.	Clermont, Florida 34711			
Director	Steve Nichols	13030 Sugarbluff Rd.	Clermont, Florida 34711			
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I.O. 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 filling 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 ceth.

SIGNATURE:	
	

Steve Nichols, President

2 111 06

407-733-1973

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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Florida Department of State

Division of Corporations Public Access System

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CORPORATION REINSTATEMENT

GBI HOLDINGS, INC.

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