

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000067014

Entity Name: THE GAB GROUP, INC.

FILED  
Apr 13, 2009  
Secretary of State

## Current Principal Place of Business:

95 SOUTH FEDERAL HIGHWAY  
202  
BOCA RATON, FL 33432 US

## New Principal Place of Business:

## Current Mailing Address:

95 SOUTH FEDERAL HIGHWAY  
202  
BOCA RATON, FL 33432 US

## New Mailing Address:

95 SOUTH FEDERAL HIGHWAY  
201  
BOCA RATON, FL 33432 US

FEI Number: 20-1036792

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOUDRY, MICHELLE  
95 SOUTH FEDERAL HIGHWAY  
202  
BOCA RATON, FL 33432 US

## Name and Address of New Registered Agent:

SOUDRY, MICHELLE  
95 SOUTH FEDERAL HIGHWAY  
201  
BOCA RATON, FL 33432 US

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: MICHELLE SOUDRY

04/13/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SOUDRY, MICHELLE  
Address: 8974 SONOMA LAKE BLVD  
City-St-Zip: BOCA RATON, FL 33434 US

Title: SD ( ) Delete  
Name: SOUDRY, SIMON  
Address: 8974 SONOMA LAKE BLVD  
City-St-Zip: BOCA RATON, FL 33434 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated in Chapter 119, 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: SIMON SOUDRY

SD

04/13/2009

Electronic Signature of Signing Officer or Director

Date