

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000125908

Entity Name: GITA, INC.

FILED  
Nov 12, 2009  
Secretary of State

## Current Principal Place of Business:

1455 SEMORAN BLVD.  
#223  
CASSELBERRY, FL 32702

## Current Mailing Address:

1455 SEMORAN BLVD.  
#223  
CASSELBERRY, FL 32702

## New Principal Place of Business:

1455 SEMORAN BLVD.  
271  
CASSELBERRY, FL 32707

## New Mailing Address:

1455 SEMORAN BLVD.  
271  
CASSELBERRY, FL 32707

FEI Number: 20-1569705

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AMIN, HETAL  
1455 SEMORAN BLVD.  
#223  
CASSELBERRY, FL 32702 US

## Name and Address of New Registered Agent:

AMIN, KINNARI  
1455 SEMORAN BLVD.  
271  
CASSELBERRY, FL 32707 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: AMIN KINNARI

11/12/2009

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: PS ( ) Delete  
Name: AMIN, HETAL  
Address: 1455 SEMORAN BLVD. #223  
City-St-Zip: CASSELBERRY, FL 32702

Title: VTD (X) Delete  
Name: AMIN, KINNARI H  
Address: 1455 SEMORAN BLVD. #223  
City-St-Zip: CASSELBERRY, FL 32702

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: AMIN, KINNARI  
Address: 1455 SEMORAN BLVD. #271  
City-St-Zip: CASSELBERRY, FL 32707

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: AMIN KINNARI

P

11/12/2009

Electronic Signature of Signing Officer or Director

Date