

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000137094

Entity Name: MIKE GAMEL INC

FILED
Oct 17, 2007
Secretary of State

Current Principal Place of Business:

3569 SHELDRAKE DR.
JACKSONVILLE, FL 32223

New Principal Place of Business:

304 EDGEWATER BRANCH COURT
JACKSONVILLE, FL 32259

Current Mailing Address:

3569 SHELDRAKE DR.
JACKSONVILLE, FL 32223

New Mailing Address:

304 EDGEWATER BRANCH COURT
JACKSONVILLE, FL 32259

FEI Number: 20-1702538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAMEL, THOMAS M MR.
3569 SHELDRAKE DR.
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

GAMEL, THOMAS M MR.
304 EDGEWATER BRANCH COURT
JACKSONVILLE, FL 32259 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: THOMAS M GAMEL

10/17/2007

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: PRES () Delete
Name: GAMEL, MIKE MR.
Address: 3569 SHELDRAKE DR.
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP () Delete
Name: GAMEL, LISA MRS.
Address: 3569 SHELDRAKE DR.
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GAMEL, MIKE MR.
Address: 304 EDGEWATER BRANCH COURT
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP (X) Change () Addition
Name: GAMEL, LISA MRS.
Address: 304 EDGEWATER BRANCH COURT
City-St-Zip: JACKSONVILLE, FL 32259

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: THOMAS M GAMEL

PRES

10/17/2007

Electronic Signature of Signing Officer or Director

Date