2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000170720

Entity Name: GREEN GATES, CORP

BERNARD, GLADYS

70 WEST 93 STREET #3-B

NEW YORK, NY 10025 US

Name:

Address:

City-St-Zip:

FILED Nov 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4556 SW 186 WAY MIRAMAR, FL 33029 US **Current Mailing Address: New Mailing Address:** PO BOX 823666 PEMBROKE PINES, FL 33082 US FEI Number: 20-2043704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRAZIER-BERNARD, SHARMAINE L 4556 SW 186 WAY MIRAMAR, FL 33029 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: SHARMAINE FRAZIER-BERNARD 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition FRAZIER-BERNARD, SHARMAINE L Name: Name: PO BOX 823666 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33082 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition BERNARD, ALFRED J JR. Name: Name: PO BOX 823666 Address: Address: PEMBROKE PINES, FL 33082 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition FRAZIER, CAROLYN Name: Name: 1919 MADISON AVENUE #502 Address: Address: City-St-Zip: NEW YORK, NY 10035 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ALFRED J BERNARD, JR. VP 11/09/2007