

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000026639

**FILED**  
**Oct 01, 2008**  
**Secretary of State**

**Entity Name:** G.G. IMAGE & ETIQUETTE CONSULTING, INC.

**Current Principal Place of Business:**

6112 CLEARSKY DR  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

11 SW 57TH CT  
MIAMI, FL 33144

**Current Mailing Address:**

6112 CLEARSKY DR.  
JACKSONVILLE, FL 32258

**New Mailing Address:**

11 SW 57TH CT  
MIAMI, FL 33144

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GARZON, GABRIELA A  
6112 CLEARSKY DR.  
JACKSONVILLE, FL 32258      US

**Name and Address of New Registered Agent:**

GARZON, GABRIELA A  
11 SW 57TH CT  
MIAMI, FL 33144      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: GABRIELA A GARZON

10/01/2008

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:           GARZON, GABRIELA A  
Address:        6112 CLEARSKY DR.  
City-St-Zip:    JACKSONVILLE, FL 32258

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            PD            (X) Change ( ) Addition  
Name:           GARZON, GABRIELA A  
Address:        11 SW 57TH CT  
City-St-Zip:    MIAMI, FL 33144

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: GABRIELA A GARZON

PD

10/01/2008

Electronic Signature of Signing Officer or Director

Date