

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000071542

**Entity Name:** GULF COAST MART, INC.

**FILED**  
**Oct 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1143 OLD NURSERY WAY  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

1143 OLD NURSERY WAY  
PENSACOLA, FL 32514

**New Mailing Address:**

**FEI Number:** 74-3146014

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KANDALA, VENKAT  
1143 OLD NURSERY WAY  
PENSACOLA, FL 32514 US

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

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: VENKAT KANDALA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: KANDALA, VENKAT  
Address: 1143 OLD NURSERY WAY  
City-St-Zip: PENSACOLA, FL 32514

Title: VP  
Name: KANDALA, VENKAT  
Address: 1143 OLD NURSERY WAY  
City-St-Zip: PENSACOLA, FL 32514

I hereby 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 all other like empowered.

SIGNATURE: VENKAT KANDALA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

10/08/2012

\_\_\_\_\_  
Date