

P06000019335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

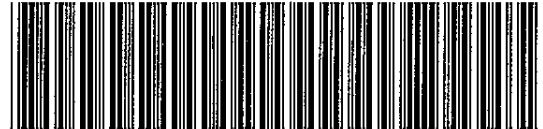
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/06/06--01032--021 **70.00

06 FEB -5 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: GELRO ENTERPRISES INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Mildred Gelfond

Name (Printed or typed)

4121 Fifth Avenue North

Address

St. Petersburg, Florida, 33713

City, State & Zip

727- 327 - 3444

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Gelro Enterprises Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4121 Fifth Avenue North, St. Petersburg Florida, 33713

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Taxi Service

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of stock at \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

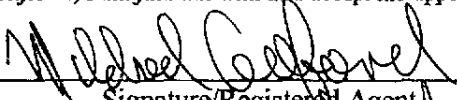
Mildred Gelfond 9000 Park Blvd.#7, Seminole Florida, 33777

ARTICLE VII INCORPORATOR

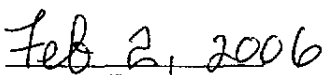
The name and address of the Incorporator is:

Mildred Gelfond 9000 Park Blvd. # 7, Seminole Florida, 33777

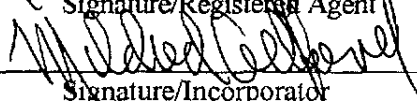
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



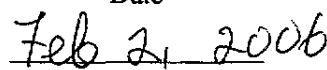
Signature/Registered Agent



Date



Signature/Incorporator



Date

FILED
06 FEB -6 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA