PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING 计图 FORM.

| | THE INCTITION | TOTAL DEL OTTE | _ | TAPILLE OLIVE | |
|---|--|-------------------------|---|--|--|
| CORPORATION REINSTATEMENT | Secretary of State | | OS DEC 15 PM 12: 17 SECRETARY OF STATE | | |
| DOCUMENT # P0600065203 1. Corporation Name | | | 200 | 7+2008 | |
| GPS Bulders, Inc. | | | 10i | 0139023081 0800500 | |
| 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address | | | Perne | REINSTAFFILE IT COLO | |
| | | _ | 1'Der | LULIT WHE VOKE | |
| | | ST RUN | - V | CR2E081 (10/08) | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | porated or Qualified | |
| City & State City & State | | | | iness In Florida 5/1/2006 | |
| | | 5. F Country 6. | | Applied For Not Applicable | |
| Zip Country | Zip | Country | 6. | 6. \$8.75 Additional Fee required | |
| 34472 MArin N | 34472 | MACION | CERTIFICATE | for a Cortificate of Status | |
| 7. Name and Address of Current Registered Agent | | | | | |
| ROGER BRADSHAW | | | | The reinstatement fee is imposed, except in | |
| Street Address (P.O. Box Number is Not Acceptable) | | | circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not | | |
| 125 LOCUST RUN | | | | | |
| Suite, Apt. #, Etc. | | | | received and requesting the reinstatement fee be waived. | |
| OCALA | | State Zip Code FL 34412 | | . The be waived. | |
| 8. I, being appointed the registered agent of the above named corporation, an familiar with and accept the obligations of section 607.0505 or 617.0503, F.S Signature of Registered Agent REGISTERED AGENT MUST SIGN Date | | | | | |
| 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) | | | | | |
| Titles Name of Officers and/or Directors | ities Name of Street Address of E Officers and/or Directors Officer and/or Directors | | | City / State / Zip | |
| PID ENTICO F FORMELLA 4604 NE 215 | | | ST Ct. | OCALA EL 34472 | |
| V/O LORNE E DAVIS 503 SE 10 th | | | · St. | Ocaba, FL 34471 | |
| Str/O Roger Braoshaw | | 125 LOLUST RUN | | Ocaba, FL 34412 | |
| D PAUL ROBERTS 816 SE 3 | | SE 34 1 | Are | Ocala, FL 34471 | |
| | | | | | |
| | | ~ | - | | |
| | | | | | |
| 10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate. and my signature shall have the same legal effect as if made under oath. | | | | | |
| 100 | Sin Oshu | | 12/12 | 1352) 454-3829 | |
| SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayume Phone # | | | | | |



John T. Driscoll, P.A.

Certified Public Accountant

825 SE 3RD Avenue, Suite 200

Telephone (352) 622-5664

Ocala, FL 34471

Fax (352) 671-5373

Member FICPA

E-mail: cpa@jtdriscollcpa.com

December 11, 2008

Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

Enclosed please find for-profit corporation reinstatement form for the corporation GPS Builders, Inc. Doc# P06000065203. My client, Mr. Paul Roberts, asked me to help him reinstate this corporation.

Mr. Roberts daughter, Verniece Roberts, has been sick for the last few years and has been recently diagnosed with leukemia (see attached article). Paul does not remember receiving annual report notices.

I have also enclosed one original and one copy of the Article of Amendment to Articles of Incorporation of GPS Builders, Inc. I have enclosed a check in the amount of \$335.00 to cover the costs as follows:

Annual Report Fee (2006 & 2007) \$ 300.00
Article of Amendment to Articles of Incorporation \$ 35.00

Total \$ 335.00

Please forward a copy of the Article of Amendment to Articles of Incorporation to the below address:

John T. Driscoll C.P.A., P.A. 825 SE 3rd Avenue, Suite 200 Ocala, Florida 34471 Thank you in advance for your kind and prompt attention to this matter, and if you should have any questions please call me at (352) 622-5664.

Sincerely,

John T Driscoll CPA

Enclosures