## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000065328

Entity Name: GPM SUPPLIES, INC.

**FILED** Sep 16, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

7045 NW 173RD DRIVE, APT #306 7045 NW 173RD DRIVE. MIAMI, FL 33015

306

MIAMI, FL 33015

**Current Mailing Address: New Mailing Address:** 

7045 NW 173RD DRIVE, APT #306 7045 NW 173RD DRIVE, MIAMI, FL 33015

306

MIAMI, FL 33015

FEI Number: 26-0299408 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:

PERALTA, GINA CAROLINA 7045 NW 173RD DRIVE, APT #306 MIAMI, FL 33015

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: GINA PERALTA

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: **PVTS** () Delete Title: (X) Change ( ) Addition

PERALTA, GINA CAROLINA Name: Name: PERALTA, GINA C 7045 NW 173RD DRIVE, APT #306 Address: 7045 NW 173RD DRIVE, APT #306 Address:

City-St-Zip: MIAMI, FL 33015 City-St-Zip: MIAMI, FL 33015

Title: (X) Delete Title: () Change () Addition Name:

PERALTA, GINA CAROLINA Name: 7045 NW 173RD DRIVE, APT #306 Address: Address: MIAMI, FL 33015 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: GINA PERALTA 09/16/2009