

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P13000080784

Entity Name: GUNSHOWPRO INC.

**FILED**  
**Oct 24, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

513 NW 25TH AVE.  
CAPE CORAL, FL 33993 US

**New Principal Place of Business:**

**Current Mailing Address:**

513 NW 25TH AVE.  
CAPE CORAL, FL 33993 US

**New Mailing Address:**

FEI Number: 46-3896625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TATE, ROBERT  
513 NW 25TH AVE.  
CAPE CORAL, FL 33993 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: ROBERT A TATE

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: TATE, ROBERT  
Address: 513 NW 25TH AVE.  
City-St-Zip: CAPE CORAL, FL 33993 US

Title: PRES  
Name: TATE, ROBERT  
Address: 513 NW 25TH AVE.  
City-St-Zip: CAPE CORAL, FL 33993 US

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: ROBERT A TATE

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

PRES

10/24/2014

\_\_\_\_\_  
Date