

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # P93000020778

1. Corporation Name

GALLERY INTERNATIONAL INC

Principal Place of Business

Mailing Address

707 LAKE AVE
LAKE WORTH, FL 33460

707 LAKE AVE
LAKE WORTH, FL 33460

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

707 LAKE AVE

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

LAKE WORTH FL

City & State

Zip

33460

Country

PALM BEACH

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

MARCH 16, 1993

5. FEI Number

65-0413445

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	MATHILDA DARDI	707 LAKE AVE	LAKE WORTH, FL 33460

200002125342--0
-03/26/97--01132--014
****373.75 ****373.75

8. Name and Address of Current Registered Agent

MARTIN E. WASHOPSKY, EA., P.A.
1803 S. AUSTRALIAN AVE STE A
WEST PALM BEACH, FL 33409

9. Name and Address of New Registered Agent

Name

MATHILDA DARDI

Street Address (P.O. Box Number is Not Acceptable)

707 LAKE AVE

Suite, Apt. #, Etc.

City

LAKE WORTH

State

FL

Zip Code

33460

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Mathilda Dardi

REGISTERED AGENT MUST SIGN

Date

MARCH 22, 1997

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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 under section 119.07(3)(i), 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.

SIGNATURE:

Mathilda Dardi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/97 (561) 588-9160
Date Daytime Phone #

CR2040 (12/96)

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Accounting Management Advisors

Established Since 1968

320 North Dixie Hwy.
Lake Worth, Florida 33460

Tel: (407) 582-3351
Fax: (407) 586-8235

March, 22nd, 1997

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

Re: Gallery International, Inc
P93000020778

Gentlemen:

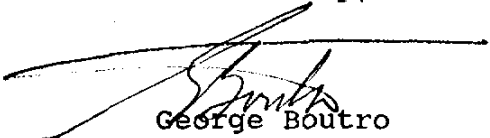
As a matter of procedure we follow up on clients' compliance and timely filing of various Florida State and County Taxes and Returns.

The subject taxpayer, upon my inquiry, informed me that the Annual Report was not received. It was mailed to the attorney's office, who was the Agent and Incorporator and as such failed to forward the Report to the client.

In view of the fact that there was no wrong doing on the part of the taxpayer, we would be grateful in your accepting the enclosed check in the amount of \$ 365.00 as payment for the back due and current fees and \$ 8.75 for the certificate of status.

Once more, we thank you for the courteous help you have always extended us.

Yours truly,


George Boutro