

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000030263			
1. Corporation Name GNT MARKETING, CORP.			
Principal Place of Business 1970 NE 153RD ST BAY 19 NORTH MIAMI BEACH FL 33162		Mailing Address 141 N.E. 3RD AVE. SUITE 205 MIAMI FL 33132	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable 141 NE 3RD AVE Suite, Apt. #, etc. 301 City & State MIAMI, FL Zip 33132 Country DADE		3. New Mailing Office Address, If Applicable 141 NE 3RD AVE Suite, Apt. #, etc. 301 City & State MIAMI, FL Zip 33132 Country DADE	
4. Date Incorporated or Qualified To Do Business in Florida 04/21/1994		5. FEI Number 65-0483487 Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PVPD	DA CUNHA, PEDRO BRUNO JR	141 NE 3RD AVENUE, SUITE 205 301	MIAMI FL 33132
V	DE SOUZA, LUIS PAULO	141 N.E. 3RD AVE., #205 301	MIAMI FL 33132
			600004689976--5 -11/20/01--01080--015 ***150.00 ***150.00
			DA 11/15
8. Name and Address of Current Registered Agent BRITO, GEORGE 407 LINCOLN RD #5B MIAMI BEACH FL 33139		9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code	
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 SIGNATURE REQUIRED REGISTERED AGENT MUST SIGN			
11. 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: <u>Luis Paulo Souza</u> 10/26/01 (305) 530-4444 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 29 AM 11:34

CR02040 (8/01)

Bríto & Bríto Accounting
407 Lincoln Road, Suite 5-b
Miami Beach, Fl 33139
Corporate Accounting and Business Development
Tel: (305) 534-9292/ Fax: (305) 534-7534

Division of Corporations

October 27, 2001

**Ref.: GNT Marketing Corp.
141 NE 3rd Ave #301
Miami, Fl 33132
Annual Report
Abate penalties**

Dear Sir/ Madam,

Please abate the above mentioned penalties. My client never received his annual report and his mail was not forwarded to his new business address.

Thanking you in advance.

Sincerely,


**George Bríto
Accountant**

GB/irp