01/09/97 09:45
JAN- 8-97 WED 10:55 JACOB FLEISHMAN & P.01

APPROVED AND FILED NO.322 P01

APPLICATION FOR REINSTATEMENT

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

H97000000179
1997 JAN -6 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000039046

1. Corporation Name
GIDEON ENTERPRISES, INC.

Principal Place of Business
1195 NW 81 St.
Miami, FL 33150

Mailing Address

REINSTATEMENT

96-97
SCC 1-6-97

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

2. New Principal Office Address, if Applicable	3. New Mailing Address, if Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 05/24/1994

5. FEI Number: 65-0497358 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED [redacted]

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
PRES.	GIDEON AZARI	1270 102 St., Bay Harbor, FL	33150
TRES./SEC.	KAREN AZARI	1270 102 St., Bay Harbor, FL	33150

8. Name and Address of Current Registered Agent

Aliza Shahaff
2240 NE 2nd Ave.
Miami, FL 33137

9. Name and Address of New Registered Agent

Name: Karen Azari
Street Address (P.O. Box Number is Not Acceptable): 1270 102 St.
Suite, Apt. #, etc.: Bay Harbor, FL 33150
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] REGISTERED AGENT MUST SIGN — Date: 1/8/1997

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. [illegible]

SIGNATURE: [signature] Karen Azari 1/8/1997 (305)696-2350 Ex. 105
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

Prepared by: Karen Azari 1270 102 St. Bay Harbor, FL 33150 (305) 696-2360

H970000000179