

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 AUG 19 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000093793

1. Corporation Name

GELL HOSPITALITY GROUP, INC.

600022479426
03/21/03--01042--013 **1358.75

REINSTATEMENT 09-03

2. Principal Office Address

13500 TAMiami TR. N.

3. Mailing Office Address

13500 TAMiami TR. N.

Suite, Apt. #, etc.

STE. 9

Suite, Apt. #, etc.

STE. 9

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34110

Country

USA

Zip

34110

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/5/1995

5. FEI Number

650626445

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

LANA KAYE DARGAI

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

13500 TAMiami TR. N.

Suite, Apt. #, Etc.

STE. 9

City

NAPLES

State
FL

Zip Code

34110

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Lana Kaye Dargai

REGISTERED AGENT MUST SIGN

Date

8/14/03

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	LANA KAYE DARGAI	13500 TAMiami TR. N.	NAPLES, FL 34110
P/D	ALBERT J. CALY	1163 ASPEN DR	NORTON SHORES, MI 49441
V/D	JAMES L. LINDBACK	4061 FOREST POINT DR.	MUSKEGON, MI 49441
S/T/D	ROBERT EKLUND	210 COUNTRY CLUB RD.	WHITEHALL, MI

10. 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:

Lana Kaye Dargai, Director
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/03

Date

239-596-1330

Daytime Phone #

CR2E081 (10/02)

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