

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAY 20 PM 11:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000006628

1. Corporation Name

GLOBAL FUNDING GROUP, INC.

2. Principal Office Address

7270 NW 12 STREET

Suite, Apt. #, etc.

STE: 150

City & State

MIAMI, FL

Zip

33126

Country

3. Mailing Office Address

7270 NW 12 STREET

Suite, Apt. #, etc.

STE: 150

City & State

MIAMI, FL

Zip

33126

Country

4. Date Incorporated or Qualified

To Do Business in Florida 01-22-1997

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 0284

7. Name and Address of Current Registered Agent

Name

GABRIEL D. HERRERA

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

7270 NW 12 STREET

Suite, Apt. #, Etc.

STE: 150

City

MIAMI

State

FL

Zip Code

33126

500037435105

06/01/04--01006--026 **1050.00

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

Date

REGISTERED AGENT MUST SIGN

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
P/D	GABRIEL D. HERRERA	7270 NW 12 STREET, STE: 150	MIAMI, FL 33126
CEO	GABRIEL D. HERRERA	7270 NW 12 STREET, STE: 150	MIAMI, FL 33126
S/D	JOHN LAGE	7270 NW 12 STREET, STE: 150	MIAMI, FL 33126

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2081 (01/04)

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

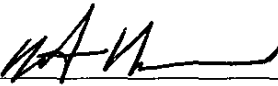
TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE REINSTATEMENT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 1998 UBR. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY,



GABRIEL D. HERRERA
PRESIDENT