

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
198 FOR AR
REINSTATEMENT



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

APPROVED
AND
FILED

1998 NOV 19 PM 1:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000014440

1. Corporation Name

GM ENTERPRISE & INVESTMENTS, INC.

Principal Place of Business

Mailing Address

6900 NW 24TH COURT
SUNRISE FL 33313

6900 NW 24TH COURT
SUNRISE FL 33313

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



SCC 11-19-98

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02/11/1997	
City & State		City & State		5. FEI Number	
Zip		Country		65-0625697	
				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				CERTIFICATE OF STATUS DESIRED <input checked="" 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 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.	Guesclin Pinchinat	6900 NW 24th Ct Sunrise Fl. 33313	Sunrise R-33313

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****158.75 ****158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PINCHINAT, GUESCLIN
6900 NW 24TH COURT
SUNRISE FL 33313

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

Guesclin Pinchinat
REGISTERED AGENT MUST SIGN

Date 11/13/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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)(l), 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: *Guesclin Pinchinat* 11/13/98 (954) 879-1294
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR22040 (9/98)