

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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AND
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01 APR 10 PM 1:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P97000016363

1. Corporation Name

GEE SDA, INC

2331 North State Rd 7 Suite 220
Lauderhill FL 33313

2. Principal Office Address

2331 North State Rd 7

Suite, Apt. #, etc.

Suite 220

City & State

Lauderhill Florida

Zip

33313

Country

Broward

3. Mailing Office Address

2331 N. State Rd 7

Suite, Apt. #, etc.

Suite 220

City & State

Lauderhill FL

Zip

33313

Country

Broward

200004014052--5

-04/17/01--01095--020

****500.00 ****500.00

200004014052--5

-04/17/01--01095--021

****489.75 ****489.75

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0729788

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

Worldwide Global Marketing Corp.

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

3980 NW 31 Terr

Suite, Apt. #, Etc.

Suite 4

City

Lauderdale Lakes

State

FL

Zip Code

33309

REINSTATEMENT 99-01

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 4-2-01

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
CEO	ST. SURIN	2331 N. State Rd 7 Suite 220	Lauderhill FL 33313
P	FLORIAN JANVIER	2331 N. State Rd 7 Suite 220	Lauderhill FL 33313
VP	VOLVIZ VOLTIRE	2331 N. State Rd 7 Suite 7	Lauderhill FL 33313
S	YVES-ROSE SEVERE	2331 N. State Rd 7 Suite 220	Lauderhill FL 33313
T	ZACHARIE DAMAS	2331 N. State Rd 7 Suite 220	Lauderhill FL 33313
			M.W

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

4-2-01 954-535-9513

Date

Daytime Phone #

CR2E081 (9/00)