

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000066051

Entity Name: GMN-WYNWOOD, INC.

FILED  
Jan 28, 2009  
Secretary of State

**Current Principal Place of Business:**

300 NW 12TH AVE  
MIAMI, FL 33128

**New Principal Place of Business:**

**Current Mailing Address:**

300 NW 12TH AVE  
MIAMI, FL 33128

**New Mailing Address:**

FEI Number: 65-0879959

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOMINGUEZ, AGUSTIN  
300 NW 12TH AVE  
MIAMI, FL 33128 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: AGUSTIN DOMINGUEZ

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DOMINGUEZ, AGUSTIN  
Address: 1460 BRICKELL AVE, SUITE 309  
City-St-Zip: MIAMI, FL 33131

Title: S ( ) Delete  
Name: RODRIGUEZ, KATHY  
Address: 300 NW 12TH AVE  
City-St-Zip: MIAMI, FL 33128

Title: VP ( ) Delete  
Name: REVALES, RON  
Address: 300 NW 12 AVE  
City-St-Zip: MIAMI, FL 33128

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AGUSTIN DOMINGUEZ

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date