PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

P99000005042

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP -8 AM 8:40

DOCUMENT # P99000005042

1. Corporation Name

Gatekeeper Business Solutions, Inc.

REINSTATEMENT 02-03

2. Principal Office Address		**3.** Mailing Office Address	
350 Jim Moran Blvd		350 Jim Moran Blvd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
Suite 121		Suite 121	
City & State		City & State	
Deerfield Beach FL		Deerfield Beach FL	
Zip	Country	Zip	Country
33442	Broward	33442	Broward

4. Date Incorporated or Qualified To Do Business in Florida: 01/14/99

5. FEI Number: 65-0884405 ☐ 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: Michael Patterson

900022484675
08/21/03--01054--014 **30.00

Street Address (P.O. Box Number is Not Acceptable): 350 Jim Moran Blvd.

Suite, Apt. #, Etc.: Suite 121

City: Deerfield Beach | State: FL | Zip Code: 33442

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: 9-2-03

REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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	Richard Aron	30 Windermere Lane	Stamford CT 06902
D	Kenneth Endelson	7027 Valencia Drive	Boca Raton FL 33433
D	Donald Goldstein	3115 S. Ocean Blvd	Highland Beach FL 33487
D	Gerald Lewin	7050 Ayrshire Lane	Boca Raton FL 33496
C	Monroe Meyerson	7172 Mandarin Drive	Boca Raton FL 33432
P	Jack Castro	350 Jim Moran Blvd, Ste 121	Deerfield Beach FL 33442

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: _____ JACK CASTRO — 8/15/03 — 954 725 6225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #