

# **2005 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000042454

Entity Name: CELLULAR GALLERY, INC.

**FILED**  
**Oct 07, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

1972 NW 55TH AVENUE  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

1972 NW 55TH AVENUE  
MARGATE, FL 33063

**New Mailing Address:**

FEI Number: 65-0915796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUSSAIN, SYED I  
1972 N W 55TH AVENUE  
MARGATE, FL 33063 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: SYED ISHRAT HUSSAIN

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: HUSSAIN, SYED I  
Address: 6079 WEST ATLANTIC BLVD.  
City-St-Zip: MARGATE, FL 33063

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SYED ISHRAT HUSSAIN

P

10/07/2005

Electronic Signature of Signing Officer or Director

Date