

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

~~CORPORATION~~
~~REINSTATEMENT~~



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

FILED

01 NOV -5 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P990000784P9.

1. Corporation Name

GULF COAST REAL ESTATE INVESTMENT CO.

2. Principal Office Address

28461 US HWY 19 NO.

Suite, Apt. #, etc.

City & State

CLEARWATER FL.

Zip

33761

Country

USA

3. Mailing Office Address

28461 US HWY 19 NO

Suite, Apt. #, etc.

City & State

CLEARWATER FL.

Zip

33761

Country

USA.

800004698148-8

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****150.00 ****150.00

4. Date Incorporated or Qualified
To Do Business in Florida

9.2.99

5. FEI Number

593597079

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 PETERS

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

28461 US HWY 19 NO.

Suite, Apt. #, Etc.

City

CLEARWATER

State
FL

Zip Code

33761

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

Michael Peters

REGISTERED AGENT MUST SIGN

Date OCT. 22, 2001

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
DIR-1 PRES.	MICHAEL PETERS	28461 US HWY 19 NO	CLEARWATER FL 33761
SEC TREAS.	TAMMY PETERS	28461 US HWY 19 NO	CLEARWATER FL 33761

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:

Michael Peters
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCT. 22, 2001

Date

Daytime Phone #

727.
726.7272

CR2E081 (9/00)



2072

October 22, 2001

Florida Department of State
Catherine Harris, Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

RE: Annual Report/Reinstatement Form

Dear Ms. Harris,

This letter will confirm that I have not received the 2001 Corporation Annual Report.
Enclosed is the Corporation Reinstatement Form, which has been executed.

Sincerely,

Michael Peters
President
Gulf Coast Real Estate

MP/sw

Enclosure

