

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

11 MAY 17 PM 1:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S65597

1. Corporation Name

E.J. Gordon and Associates, Inc.

2. Principal Office Address - No P.O. Box #

2901 NW 19th Street

Suite, Apt. #, etc

City & State

Ft. Lauderdale, FL

Zip

33311

Country

USA

3. Mailing Office Address

4999 NW 75th Avenue

Suite, Apt. #, etc

City & State

Lauderhill

Zip

FL

Country

33319

800207212318

05/05/11--01002--001 **1455.00

CR2E081 (11/10)

07-11

4. Date Incorporated or Qualified
To Do Business in Florida

07/08/1991

5. FEI Number

65-0272589

☐ 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

Elisha Gordon, Jr.

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

4999 NW 75th Avenue

Suite, Apt. #, Etc

City

Lauderhill

State

FL

Zip Code

33319

800207212318

05/18/11--01040--001 **45.00

\$ 1,350.00

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

Elisha Gordon Jr.

Date 04/29/2011

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
P	Elisha Gordon, Jr.	2901 NW 19th Street	Ft. Laud, FL 33311
V	Elisha Gordon, III	4999 NW 75th Ave.	Lauderhill, FL 33319
T	James A Gordon	2901 NW 19th Street	Ft. Laud, FL 33311
S	Elishia Gordon	4999 NW 75th Ave	Lauderhill, FL 33319
M	Timothy Gordon	2901 NW 19th Street	Ft. Laud, FL 33311

10. E-mail Address: jmcclsvs@aol.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

SIGNATURE: Elisha Gordon III

04/29/11

954-791-1701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #