PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 DEC 15 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G87577

1. Corporation Name
JABT CORPORATION, INC

Principal Place of Business
2520 NE 9TH AVENUE
CAPE CORAL, FL 33909

Mailing Address
5232 SW. 5. PL.
Cape Coral FL.
33914

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 96-97

2. New Principal Office Address, If Applicable
2524 NE 9TH AVENUE
Suite, Apt. #, etc.
City & State: CAPE CORAL, FL. 33909
Zip: 33909 Country: USA

3. New Mail Office Address, If Applicable
5232 SW. 5. PL
Suite, Apt. #, etc.
City & State: CAPE CORAL, FL. 33914
Zip: 33914 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 1/12/1984

5. FEI Number: 59-2408750 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	SCHOU, JENS A.	5232 SW 5TH PLACE	CAPE CORAL FL 33991
D	SCHOU, TROND	5338 MAJESTIC COURT	CAPE CORAL FL 33904

400002374564--5
-12/17/97--01037--008
****915.00 ****915.00

8. Name and Address of Current Registered Agent
~~FROLOW, MARTIN J.~~
~~2090 PALM BCH LAKES BLVD S 902~~
~~WEST PALM BCH FL 33409~~

9. Name and Address of New Registered Agent
Name: Jens A. Schou
5232 SW 5th Court
Suite, Apt. #, etc.:
City: Cape Coral, FL State: FL Zip Code: 33991

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: * Jens A. Schou. Date: 12.9.97
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. 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.

Jens A. Schou

SIGNATURE: Jens A. Schou. 12.9.97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E040 (12/96)