

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV 18 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000082977

1. Corporation Name

J.G. REMODELING & CONSTRUCTION CORP.

Principal Place of Business

1000 CLINT MOORE RD. STE 105
BOCA RATON FL 33487

Mailing Address

1000 CLINT MOORE RD. STE 105
BOCA RATON FL 33487



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/21/2001

5. FEI Number

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	GROSSMAN, JEFFREY A	1000 CLINT MOORE RD, STE 105	BOCA RATON FL 33487
VD	GROSSMAN, AMY	1000 CLINT MOORE RD, STE 105	BOCA RATON FL 33487

800008635248
10/28/02 01112 012 **150.00

8. Name and Address of Current Registered Agent

FEINSTEIN, MARK D
290 NW 165 STREET, PH 4-CITICENTRE
MIAMI FL 33169

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

Amy Grossman / JG. Remodeling
1000 Clint Moore Rd Ste 105
Boca Raton, FL 33496

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10.24.02

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., 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10.24.02 561-998

**J.G. REMODELING
AND CONSTRUCTION, INC.**

FL State License #CR-C058526

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October 24, 2002

Division of corporations
Annual report/ Reinstatement section
P.O Box 6327
Tallahassee, FL 32314-6327

Re: Document #PO1000082977
J.G. Remodeling and Construction, Corp.

To whom it may concern:

We received a notice of administrative dissolution or revocation on 10/23/02. we are writing to inform you that we never received the original form. We have contacted your customer help line and spoke with one of your representatives, who has instructed me to pay the original \$150.00 fee and sign revocation form. Enclosed please find check and signatures. Please send correspondence, confirming the check has been received and notice that our company has been reinstated.

Thank you,



Anna M. Karasik
Manager

DO NOT REMOVE!