

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P05000045358

1. Corporation Name

JEWELRY BY HENRI, INC.

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

601 NE 36TH ST

Suite, Apt. #, etc.

#2301

City & State

MIAMI FL

Zip

33137

Country

US

3. Mailing Office Address

601 NE 36TH ST

Suite, Apt. #, etc.

#2301

City & State

MIAMI FL

Zip

33137

Country

US

7. Name and Address of Current Registered Agent

Name

ANDRES E. VELASQUEZ

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

601 NE 36th ST

Suite, Apt. #, Etc.

2301

City

MIAMI

State

FL

Zip Code

33137

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

REGISTERED AGENT MUST SIGN

Date

01-02-2008

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/D	ANDRES E. VELASQUEZ	601 NE 36TH ST #2301	MIAMI FL 33137

000113814720
01/04/08--01035--001 **300.00

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/02/08

Date

Daytime Phone #

FILED

08 JAN -4 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 06-07^{KS}

CR2E081 (12/07)

4. Date Incorporated or Qualified
To Do Business in Florida

3/25/2005

5. FEI Number

20-2591901

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.