

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

97 AUG -7 PM 2:50

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # **P93000072730**

1. Corporation Name

JMG CONSTRUCTION CORPORATION

Mailing Address
 1702 EAST TERRACE DRIVE
 LAKE WORTH FL 33460

Principal Place of Business
 1702 EAST TERRACE DRIVE
 LAKE WORTH FL 33460

AD

REINSTATEMENT

94-97

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

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable

3. New Principal Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

10/11/1993

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65 0770295

Applied For
 Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
D	GUETO, ELAYNE Z	1702 EAST TERRACE DRIVE	LAKE WORTH FL 33460
D	Noel J Guillama	1702 EAST Terrace Drive	Lake Worth FL 33460
D	Jeffery L McIntyre	1262 Essex Dr	Wellington FLA 33414
			800002264918--2 -08/12/97--01077--004 ***1245.00 ***1245.00

8. Name and Address of Current Registered Agent

~~GUETO, ELAYNE Z~~ *Noel J Guillama*
 1702 EAST TERRACE DRIVE
 LAKE WORTH FL 33460
ELAYNE Z Gueto
NO CHANGE

9. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City
 State **FL** Zip Code

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

REGISTERED AGENT MUST SIGN

Date

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. 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.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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. 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:

Jeffery L McIntyre

Jeffery L McIntyre 1-561-793-1997

CR2E040 (8/94)