

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN 25 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # p94000091252

1. Corporation Name

JBL Design Inc
19495 Biscayne Blvd Suite 410
Aventura FL 33180

2. Principal Office Address

same

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. Date Incorporated or Qualified -
To Do Business in Florida**

5. FEI Number

05-0559540

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

Janice Barney

200038415072
06/29/04--01021--021 **15.00

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

19495 Biscayne Blvd Suite 410

Suite, Apt. #, Etc.

City

Aventura FL

State
FL

Zip Code

33180

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

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
President / Secretary	Janice Lipton	19495 Biscayne Blvd. Suite 410	Aventura FL 33180
VP /	Alan Lipton	19495 Biscayne Blvd Suite 410	Aventura FL 33180
Treasurer			

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (07/04)

205 2

JBL Design, Inc.
19495 Biscayne Blvd., Suite 410
Aventura, FL 33180

May 20, 2004

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: JBL Design, Inc
P94000091252

To Whom It May Concern:

Enclosed please find:

1. Uniform Business Report filed in 2003
2. Copy of letter dated 6/3/03 returning Uniform Business Report for lack of signature.
3. Letter from JBL Design, Inc advising corrections have been made and Uniform Business Report resubmitted.
4. Reinstatement Form completed as per verbal phone call to examiner
5. Check for \$150.00 for 2004

We have been advised verbally by your office that an error was made and the proper documents for 2003 were received timely however the corrections were not made in your computer system, thereby making this corporation inactive.

Our receipt/tracking number for the original payment was deposited by you on 5/1/03, is 01029 016 450. Please refer to this number to substantiate timely receipt of payment.

We are enclosing a check for \$150.00 for our 2004 renewal and respectfully request that any penalties be abated since the original documents were received on time by your office.

Sincerely,


Janice Barney
Registered Agent