PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. A DEPARTMENT 00 AUG 30 AM 10: 19 SEGRETARY OF STATE TALLAHASSEE. FEORIDA P98000089850 DOCUMENT # 1. Corporation Name 000003389640---09/12/00--01038--005 JAMA USA INC. -8 👊 ****150.00 ****150.00 ... 000003389640--8 2. Principal Office Address 3. Mailing Office Address -09/12/00--01038--006 ****150.00 ****150.00 ~ 721 S.E. 17th Street Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified Suite 200 To Do Business in Florida 10/21/98 City & State City & State 5. FEI Number Applied For Not Applicable Fort Lauderdale 65-0871188 Country \$8.75 Additional Fee required for a Certificate of Status 33316 USA 7. Name and Address of Current Registered Agent Name FERNAND LAMOTHE Street Address (P.O. Box Number is Not Acceptable) 721 S.E. 17th Street Suite, Apt. #, Etc. -_Suite=200==== Zip Code State 33316 Fort Lauderdale, 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 REGISTARED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Qirector (Florida nonprofit corporations must list at least 3 directors) Name of Street Address of Each Titles City / State / Zip Officers and/or Directors Officer and/or Director ninector.

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 accorate, and my signature shall have the same legal effect as if made under oath.

HIDALGO M.C.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

\$ 12/2000

Daytime Phone #

Lamothe Bergeron

Comptables agrees
Chartered Accountants
Colete nominale

ernana Lamatha, CA Luc Bergeron, CA

оне кого, ССА Монетейна (отпрет

THE STANDARD OF STANDARD STAND

.ret. (450) 967-0203 Teléc. (450) 967-2577

40, ca la Montagrie Sie Arme des Lacs (Ouébec) JOP, 180 Tol: (514) 865-0573

FLORIDE (U.S.A.) 7.00 E 17th Street #2003 Fort Lauderdale (Florida) \$3316 (a. (054) 768-9948 Fan. (954) 788-9775 Fort Lauderdale, June 27, 2000

Florida Department of State Annual Reports Filings Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: JAMA USA INC.

Document # P98000089850

Dear Sir or Madam:

My client claims she never received her corporation's annual report for the year 1999 and 2000. In effect, in the month of January 1999, she moved to France from the U.S.. As a result, the annual report that was mailed to her personal address in U.S. never reached her.

I concede that my client should have informed my office of the change of her personal address. On her behalf, I deeply apologize for the mistake. Also, I would like you to accept my client's checks in the amount of \$150 in payment of the annual report 1999 and 2000, and rebate the late filing penalty charged to the Corporation's account.

The / Clautic

I appreciate your cooperation.

Sincerely,

Fernand Lamothé, C.A.

TO THE WALL OF THE THE LATTER OF THE PROPERTY OF

र भारतिक रहीर है। जिल्लामा क्षेत्र के अपने अवस्थान क्षेत्र के अपने क्षेत्र के क्षेत्र के क्षेत्र के क्षेत्र के इस क्षेत्र के क्षेत्र

Enclosures