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F - AR	PLEASE READ	FLORIDA	A DEPARTMEI	NT OF STATE	OMPLET	ING THIS FORM.	1012	
V	Fly I)	Sandra B. Mor Secretary of S		 	FILE:		
REIN	NATE AND THE		VISION OF CORPOR		98	DEC 31 PM 2:30		
DOCUMENT # 686013 1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
1	ELL, INC.				TĂĨ	LAHASSEE, FLORIDA		
JOAN OL	, IIV.							
Principal Place of Business Mailing Address					1 1 20 1(0 0)(1	li lanta Alter antal stana lett night ather de	REL SIBIL BIĞLI GISLI IKBI	
317 N. ORANGE AVE. 317 N.			EDY PRINTING ORANGE AVE. DO FL 32901					
	addresses are incorrect in any way, line thre		nformation and entering Office Address, If		4 5 4 1			
Suite, Apt.		Suite, Apt. #,		Applicable	4. Date incorpo To Do Busin	orated or Qualified less in Florida 08/25	5/1980	
City & Stat	<u> </u>	City & State			5. FEI Number Applied For			
Zip	Country	Zip	Country	y	6.	\$8.75 /	Not Applicable Additional Fee required	
7 Names	and Street Addresses of Each Officer and/	or Director (Flor	rida nontrolit comora	itions must list at lea	<u> </u>	for a	Certificate of Status	
Title(s)	Name of Officers and/or Directors	<u> </u>	Str	eet Address of Each		City / State /	/ Zip	
D 1	LAZARUS LAWRENCE		Officer and/or Director 3 (Do NOT Use Post Office Box No		ımbers)	ODIANDO EL 27 GA		
	D LAZARUS, LAWRENCE		375 N. ORANGE AVE.,			ORLANDO FL 3280		
D	LAZARUS, ETTA		376 N. ORANGE AVE.,			ORLANDO FL 3280	>t	
							}	
				90 <mark>0002735889—5</mark>			39 <u>-</u> 5	
		1				****15U_U0 *	***150.00	
	8. Name and Address of Current F	Registered Age	nt	Name	9. Name and A	Address of New Registered Age	nt	
LAZAF	RUS, LAWRENCE				O Boy Number	is Not Assentable)		
317273 N. ORANGE AVE.					Address (P.O. Box Number is Not Acceptable) Apt. #, Etc.			
ORLANDO FL 32801				City State Zip Code				
10. I. hein	g appointed the registered agent of the abo	ve namèd como	ration, am familiar wi		pligations of Section	\FL\		
Signature of Registered	of Agent NA	ELLOF	PES	Millian !	Mari	Date X 1 - 2	230	
14 Th		GISTERED AG	 /-` -			NA.		
	nis corporation owes or ha tangible Personal Propert			Yes 🗷	No 🗆	(Secotifici Side 18	r inconnation	
this rein	y that I am an officer or director or the recelon nstatement application, the reason for disso by the corporation have been paid and the re application is true and accurate, and my sig	lution has been names of individu	eliminated, the corpo uals listed on this for	rate name satisfies in do not qualify for a	the requirements an exemption und	of section 607.0401 or 617.0401,	F.S., that all fees	
SIGNA	TURE: L	RES	EQUIF	CD		× (\//>	197	
	SIGNATURE AND TYPED OR PRI	NTED NAME OF S	HGNING OFFICER OR I	DIRECTOR		Date Daytim	ne Phone #	





December 23, 1998

Printing

Department of State
Division of Corporations
5050 West Tennessee Street
Tallahassee, FL 32399

Copying

Corporation Name: Jaysell, Inc.

Graphic Design

Gentlemen:

Digital Network

Enclosed please find our application for reinstatement together with a check in the amount of \$150.00.

Please be advised that we did not receive any previous form for this year which is the reason for said form not being filed timely. Please note incorrect addresses which may have prevented proper delivery of prior mailings.

We respectfully request abatement of any additional fees since the forms were not received.

Etta Lazarus

317 N. Orange Avenue

Orlando, FL 32801

(407) 423-2051

Fax: (407) 843-5962