	PLEASE REA	AD ALL INST	FRUCTIONS	BEFORE C	COMPLET	ING THIS FO	DRM.		
	LICATION FOR	FLORID	A DEPARTME Sundra 3. Mo econo. of	NT OF STATE rtham State	7				
DOCUMENT# F9700004830					98 NOV 20 PM L: n3				
Corporation Name							-		
JERRY'S PAVING, INC.						SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place	e of Business	ress	· . · · · · · · · · · · · · · · · · · ·	\$ FME(1) 4 F 117	S ibris 1981) SSler sseri sbil	1 60/10 80131 0:00/1008   11/1 mars	1881		
			-3290-MUSTANG-DR BBOOKSVILLE-FL-34609-0625						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable					4. Date Incorporated or Qualified				
		P.O. Suite, Apt. #	BOX 1581		To Do Business in Florida 09/16/1997				
Suite, Apt. #, e	5x 15815	City & State	ooksuill	ح	5. FEI Number		Applied		
Zip Country Zip			<u> </u>			23-2653443	Not App		
<u> 3460</u>	9 USA	<u>  \\ \&amp;\\ \( \) \\ \\ \( \) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ </u>	09	<u>USA</u>		OF STATUS DESIRED	for a Certificate of S	tatus	
Title(s)	d Street Addresses of Each Office Name of Office and/or Director	ations must list at lea reet Address of Each fficer and/or Director se Post Office Box No	1	4	City / State / Zip				
	BOSWELL, JERRY  3 (Do NOT 3288 MUSTA) 13425			· · · · · · · · · · · · · · · · · · ·		BROOKSVILLE FI	_ 34609 _ ++ \ \		
							<del>&gt;</del>		
				20002698322-9 -12/01/9801012-009 *****158.75 *****158.75					
				· · · · · · ·					
	B 11/24/98 AR						<u> </u>		
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent				
ROSWELL JERRY					O Boy Number	is Not Accentable)			
3288 MUSTANG DR				Street Address (P.O. Box Number is Not Acceptable)  13 43 5 80 1 to Calt  Suite, Apt. #, Etc.					
BROOKSVILLE FL 34609-0625 Suit					State Zip Code				
Deens Hill FL 3407								1	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accelet the obligations of Section 607.0505, F.S.  Signature of Registered Agent Registered Agent Date 11-13-98  REGISTERED AGENT MUST SIGN									
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes 🔀 No 🗆 (See other side for information on intangible tax.)									
12. 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 SIGNATURE AND PRINCED NAME OF SIGNING OFFICER OR/DIRECTION  Date  Dat									
Daysing Priorie #									

## PERRY N. BLACKMAN CERTIFIED PUBLIC ACCOUNTANT

CERTIFIED PUBLIC ACCOUNTANT

6913 CASTOR AVENUE PHILADELPHIA, PENNSYLVANIA 19149 (215) 342-3550 FAX (215) 745-7159 MEMBER

AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
PENNSYLVANIA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
BUCKS COUNTY ASSOCIATION OF
CERTIFIED PUBLIC ACCOUNTANTS

November 16, 1998

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Jerry's Paving, Inc. F97000004830

To Whom It May Concern:

Enclosed please find the Certificate of Administrative Dissolution or Revocation received by the above captioned taxpayer for failure to file its 1998 Corporation Annual Report. Also enclosed please find a completed Application for Reinstatement.

Please be advised that the taxpayer recently began operations in Florida and was unaware that the report needed to be filed. In addition, the mailing address changed and no previous information regarding the Annual Report was received by the taxpayer.

Due to the above circumstances, we are requesting that the Reinstatement Fee be waived. A check for \$150.00 is enclosed for the Annual Report Fee and the Corporate Supplemental Fee.

Thank you for your consideration in this matter.

Sincerely,

PERRY N. BLACKMAN Certified Public Accountant

by: Carol Sharp

Senior Accountant

(and Sharp

Enclosures