PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.					
APPLICATION FOR REINSTATEMENT	FLORIDA DEPART Katherine Secretary DIVISION OF CO	e Harris of State	ı	EII ED	O
DOCUMENT #G7005 A			99 DEC -9 AM 9: 16		
J.B's International, Inc.			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Business 4130 NW 10th Street Delray Beach, FL 33445					
If above addresses are incorrect in any way, line through incorrect information and enter correction below. New Principal Office Address, If Applicable 3 New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida		
uite. Apt. #, etc. Suite, Apt. #, etc. City & State			5. FEI Number		
Zip Country	Zip C	Country	6. CERTIFICATE	OF STATUS DESIRED TO S8.75 Additional For a Certificate C	
7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers. Street Address of Each					
Title(s) Name of Officers and/or Directors 1 2	3 (Do N	Officer and/or Director NOT Use Post Office Box N	umbers)	City / State / Zip	
Pres. James Bannoura 4130 M		NW 10th S	Hreet	Delroy Beach, FL33	3445
V.Pies Michelle Bannowa 4130 NW 10th Stre				Delray Beach, FL3	3445
Tres James Bannovia 4130 NW 10th S.			reet	Delray Beach, FL3	3445
Sec. Michelle Bannoura A130 NW 10th St				Delray Boach, FL3	33445
				00003078318 -12/22/9901081 *****150.00 *****1	
					SP
8. Name and Address of Current Registered Agent Name			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Address of New Registered Agent	(12/98)
James Bourno 4130 NW 10th S	Street Address (F 4130	Street Address (P.O. Box Number is Not Acceptable) 4130 NW 10th 9tt/eet			
Delray Beach, FL 33445 Cin Delva			1 Beac	State Zip Code FL 3344	<u></u>
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 Date 12-8-99 REGISTERED AGENT MUST SIGN					
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes No					
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 filling this reinstaltement 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 DAYLING Phone & Dayline Phone &					

THE LAW OFFICE OF JAMES G. BANNOURA, ESQ.



MEMBER OF FL, MA, NY BAR

TELEPHONE: (561) 394-9455 TELEFAX: (561) 394-5134 Email: jimbann@ool.com ONE & OCEAN BLVD. &UITE 212 BOCA RATON, FL 33432

December 8, 1999

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

To Whom It May Concern:

Back in March, my mother who is my family's accountant, suffered a cerebral aneurism. My mother needs 24 hour care which my father and myself have provided her. Due to my mother's condition, we have not filed an annual report this year for J.B.'s International, Inc. I ask that due to our unfortunate circumstance that all fines be waived in reinstating our corporation.

Thank you for your attention to my request. If you should have any questions or concerns, please do not hesitate to contact my office or call me on my cellular phone (561) 376-8317.

Respectfully,

James G. Bannoura, Esq.