

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION
REINSTATEMENT

97-00

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L27815

1. Corporation Name

J.K. REAL ESTATE, INC.

2. Principal Office Address

3740 NW 78TH ST.

Suite, Apt. #, etc.

City & State

MIAMI, FL.

Zip

33147

Country

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11-03-1989

SP

5. FEI Number

650160155

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 97-00

7. Name and Address of Current Registered Agent

Name

KENNETH DAVID GOLDRING

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

3740 NW 78TH STREET

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33147

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

Date 5-04-00

REGISTERED AGENT MUST SIGN

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
D	KENNETH DAVID GOLDRING	4560 PRAIRIE AVE MIAMI BCH, FL.	
D	JOSE VALLEJO	3740 NW 78TH ST. MIAMI, FL. 33147	

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

5-04-00

Date

Daytime Phone #

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Florida Department of State
Division of Corporations
Public Access System
 Katherine Harris, Secretary of State

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To:

Division of Corporations
 Fax Number : (850) 922-4004

From:

Account Name : FAS-T CORP. AGENTS, INC.
 Account Number : 071001002335
 Phone : (305) 599-0839
 Fax Number : (305) 716-0346

CORPORATION REINSTATEMENT

J.K. REAL ESTATE, INC.

Certificate of Status	0
Cerified Copy	0
Page Count	01
Estimated Charge	\$1,200.00