

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PS 1 3 2

FILED

04 MAR 31 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700030932867
03/23/04--01089--014 **300.00

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L53320**

1. Corporation Name

JJ PLASTICS, INC.

2. Principal Office Address

11905 ROYAL PALM BLVD

Suite, Apt. #, etc.

APT 204

City & State

CORAL SPRINGS FL

Zip

33065

Country

US

3. Mailing Office Address

11905 ROYAL PALM BLVD

Suite, Apt. #, etc.

APT 204

City & State

CORAL SPRINGS FL

Zip

33065

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

2/27/90

5. FEI Number

65-0171887

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

HOWARD M VENGER

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

11905 ROYAL PALM BLVD

Suite, Apt. #, Etc.

APT 204

City

CORAL SPRINGS

State
FL

Zip Code

33065

REINSTATEMENT

03-04

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

[Signature]

Date

3-18-04

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
P/T	HOWARD M VENGER	11905 ROYAL PALM BLVD	CORAL SPRINGS FL 33065
S	CARL L. VENGER	11905 ROYAL PALM BLVD	CORAL SPRINGS FL 33065

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] **H. M. VENGER Pres**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3-18-04 954 587-5151

Daytime Phone #

CR2081 (01/04)

[Handwritten mark]

J J PLASTICS

11905 Royal Palm Blvd.

Apt. 204

Coral Springs, FL 33065

954 587-5151

March 19, 2004

Department of State
Division of Corporations
POB 6327
Tallahassee, FL 32399

Re: Reinstatement
Document #L53320

To Whom It May Concern:

It was brought to my attention today that my corporate status is listed "inactive". My principal and mailing address changed in 2002 and I have been unable to find any record of receiving the Annual Report for 2003 and have not received a report for 2004.

I have enclosed an executed Corporation Reinstatement form and a check for \$300, paying for the years 2003 and 2004. I am requesting that the penalty for reinstatement be waived due to my address change and not receiving the form for 2003.

Thank you

Sincerely yours,



Howard M. Venger
President