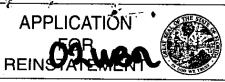
· PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L8546

1. Corporation Name

R.J. GATORS OF JUPITER, INC.

Principal Place of Business

NTOWN PD

6390 INDIANTOWN RD JUPITER FL 33458 US Mailing Address

609 N HEPBURN AVE., SUITE 103

JUPITER FL 33458

FILED

02 NOV -4 PM 1:36

JALLAHASSEE, FLORIDA



if above :	addraesae ara	incorrect in any way line to	prough ingerset	:- -	mal			
If above addresses are incorrect in any way, line through incorrect 2. New Principal Office Address, If Applicable 3. New Mai Suite, Apt. #, etc. Suite, Apt. # City& State City& State				information and enter correction below. ling Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 07/02/1990		
				, etc.	4	5. FEI Number		
				& State		39-20/6903 Not Applic		Not Applicable
Zip Country			Zip Countr		Country	6. CERTIFICAT	E OF STATUS DESIRED 🔲 \$8	.75 Additional Fee required for a Certificate of Status
7. Names	and Street Add	dresses of Each Officer and	J/or Director (Flo	orida nonprof	it corporations must list at le	east 3 directors)		
Title(s)	(s) Name of Officers and/or Directors			Street Address o Officer and/or D				
P	TIMOTEO, REGINALD			609 N HEPBURN AVE			JUPITER FL	
D	TIMOTEO, MITCHELL			609 N HEPBURN AVE #103			JUPITER FL	
	S No.				Mula	\		
8. Name and Address of Current Registered Agent Name						9. Name and	Address of New Registered	Agent
TIMÓTEO, REGINALD L. 609 N HEPBURN AVE., SUITE 103 JUPITER FL 33458					Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.			
					City State Zip Code FL			
10. I, being Signature of Registered	ı	RIGHT	ove named corpo		NRED	bligations of Secti	on 607.0505, F.S. or 617.050	

11. 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

10/3/102

0326

Daytime Phone #



October 31, 2002

Department of State-Division of Corporations Annual Report/Reinstatement Section 409 East Gaines St. Tallahassee, FL 32399

Re: Application for Reinstatement Doc# L85467 – R.J.Gator's of Jupiter, Inc.

To Whom It May Concern:

Enclosed is the completed application and fee for reinstatement. We did not receive the two previously sent (UBR) Uniform Business Report notices. If these previous notices were sent they must have been sent to an incorrect address or, recipient. We have no record in our office of ever receiving documents prior to the enclosed forms.

If there are any problems in reinstatement, please contact our office at (561)-748-6731.

Thank you for your cooperation and immediate attention to this matter.

Reginald Timoteo CEO