

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

①

APPLICATION FOR
RESTATEMENT
DOCUMENT # **ML0423**



BB-99AR

FILED

99 MAR 16 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700002814257--1
03/22/99--01140--022
***1482.50 ***1482.50

1 Corporation Name

A-1 JASCO, Inc.

Principal Place of Business

**255 N.E. 69th Street
Miami, Florida 33138**

Mailing Address

**430 South Shore Drive
Miami Beach, Florida 33141**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2 New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3 New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4 Date Incorporated or Qualified
To Do Business in Florida

1987

5 FET Number

Applied For
☒ Not Applicable

6 CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
Pres	Edward Stern	430 South Shore Drive	Miami Beach, Florida 33141
V.P.	Jeffrey Stern	6744 N.E. 4th Avenue	Miami, Florida 33138
Sec.	Orly Stern	6744 N.E. 4th Avenue	Miami, Florida 33138

2/26/99

8. Name and Address of Current Registered Agent

**Edward Stern
7760 N.E 4th Court
Miami, Florida 33138**

9. Name and Address of New Registered Agent

Name
Edward Stern
Street Address (P.O. Box Number is Not Acceptable)
430 South Shore Drive
Suite, Apt. #, Etc.
City
Miami Beach,
State
FL
Zip Code
33141

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.05(5), F.S.

Signature of
Registered Agent

Edward Stern
REGISTERED AGENT MUST SIGN

Date **March 12, 1999**

11. This corporation owes 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 re-statement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.05(1) or 617.04(1), 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, (iii), 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:

Edward Stern

EDWARD STERN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 12, 1999 (305) 756-7546

Date Daytime Phone

(2)

A-1 JASCO, INC.
430 South Shore Drive
Miami Beach, Florida 33141
(305) 756-7546

March 12, 1999

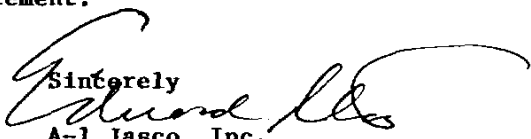
Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Gentlemen:

As per telephone conversation on March 8, 1999 requesting the enclosed reinstatement application. Thank you for the prompt service.

Also please find enclosed our check #1357 in the amount of \$1,482.50. As we did not receive the notice in 1988, please waive the late fee.

Thank you for your cooperation in this matter, and await your early notice of reinstatement.

Sincerely

A-1 Jasco, Inc.
by: Edward Stern

Encl:

Application completed for reinstatement
Check #1357 (\$1,482.50)