

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING AND FILED

192

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

05 APR 18 AM 11:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N 02000001823

1. Corporation Name

Just For Just Causes Inc.

REINSTATEMENT 03-05

MRD

2. Principal Office Address  
9050 NW 10 Place  
Suite, Apt. #, etc.

3. Mailing Office Address  
9050 NW 10 Place  
Suite, Apt. #, etc.

City & State  
Plantation Florida  
Zip Country  
33322 USA

4. Date Incorporated or Qualified  
To Do Business in Florida  
5. FEI Number  
071-28 0578  
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  
Leonard E. Cerisano  
Street Address (P.O. Box Number is Not Acceptable)  
9050 NW 10 Place  
Suite, Apt. #, Etc.  
City Plantation  
State Zip Code  
FL 33322  
200054210842  
05/10/05--01051--012 \*\*183.75

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

*Leonard E. Cerisano*

Date 4-15-2005

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
V	Marina Cerisano	9050 NW 10 Place	Plantation FL 33322
S	Lorena Cerisano	8 Lark Terrace	Goshen NY 10924
P	Leonard E. Cerisano	9050 NW 10 Place	Plantation FL 33322

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:

*Leonard E. Cerisano*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-2005 954-424-9553  
Date Daytime Phone #

CR2E081 (01/04)

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# JUST FOR JUST CAUSES INC.

9050 NW 10 PLACE PLANTATION FL. 33322

954-424-9553

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

April 14, 2005

Dear Sirs:

Please note that I have a change of address for my non-profit company, Just for Just Causes, Inc.

The previous address was:

1020 NW 85 Terrace  
Plantation, Fl. 33322

I moved from the above address April 2003 to my present address

9050 NW 10 Place  
Plantation, Fl. 33322.

During this move, I did not receive the renewal survey to pay the annual fees.

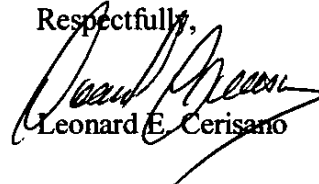
I was told by a representative to attach a letter to this reinstatement form explaining the reason for my inadvertent non-compliance and that the delinquency fee could be waived.

I am enclosing a check in the amount of <sup>183.75</sup> ~~\$122.50~~ (Check # 1880 (\$61.25 per year for 2003 & 2004) + 2005)

After your decision to waive or not to waive the penalty of \$175.00 please notify me at the new address and I'll forward a check for the amount due.

Your consideration is greatly appreciated.

Respectfully,

  
Leonard E. Cerisano