

N98000002633

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

**Katherine Harris**  
Secretary of State

DIVISION OF CORPORATIONS

**FILED**

01 DEC 17 PM 2:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N98000002633

**1. Corporation Name**

Cultures of Joy, Inc.

**2. Principal Office Address**

7927 LaSalle Blv

Suite, Apt. #, etc.

**3. Mailing Office Address**

Same

Suite, Apt. #, etc.

**City & State**

Miramar, Fla.

**City & State**

**Zip**

33023

**Country**

USA

**Zip**

**Country**

**4. Date Incorporated or Qualified  
To Do Business in Florida**

5/5/98

**5. FEI Number**

650833813

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**

Virginia Jolly

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

7927 LaSalle Blv.

**Suite, Apt. #, Etc.**

**City**

Miramar

**State**

FL

**Zip Code**

33023

**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

Virginia Jolly

REGISTERED AGENT MUST SIGN

Date 12/10/01

**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
DP	Virginia Jolly	7927 LaSalle Blv	Miramar, FL 33023
OS	La Taya Williams	2819 Funston St	Hollywood FL 33020
DT	Wilfred M. Jolly, Jr	7927 LaSalle Blv	Miramar, FL 33023
		Reinstated 12-18-01 MS	

**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:**

Virginia Jolly Virginia Jolly

Date

12/10/01 954-985-8242

Daytime Phone #

CR2E081 (9/00)