

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

03 FEB -6 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000026188

1. Corporation Name

J. J. M. USA CORP.

2. Principal Office Address

2321 S.W. 31st Ave.

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

HALLANDALE FL

Zip

33009

Country

US

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/14/00

5. FEI Number

65-0990306

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

LANDRY STEPHANE

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

2321 SW 31st AVENUE

Suite, Apt. #, Etc.

City

HALLANDALE

State

FL

Zip Code

33009

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]

REGISTERED AGENT MUST SIGN

Date

02/13/03

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	LANDRY STEPHANE	2321 SW 31 st AVENUE HALLANDALE, FL 33009	HALLANDALE, FL 33009
VP	LANDRY JEAN-MARIE	4800 BAYVIEW DR.	FT LAUDERDALE FL 33308
S	LANDRY JACQUELINE	4800 BAYVIEW DR.	FT LAUDERDALE FL 33308

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephane Landry pres.

Date

02/13/03 954-776 2833

Daytime Phone #

CR2E081 (9/01)



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

January 2, 2003

J.J.M. USA CORP.
2321 SW 31ST AVENUE
HALLANDALE, FL 33009

SUBJECT: J.J.M. USA CORP.
Ref. Number: P00000026188

We have received your document for J.J.M. USA CORP., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$300.00.

Because your reinstatement was not completed in time for you to receive a 2003 annual report form/uniform business report, we must collect the fee(s) due for the current calendar year. Therefore, the total amount due to reinstate the entity is \$300.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Marquitta Williams
Document Specialist

Letter Number: 203A00000038