


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**  
 02 FEB 11 AM 8:59  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT #** P00000038871

**1. Corporation Name**  
 J&M Motors, Inc.

01-02-UBK

**2. Principal Office Address** 6731 Edgewater Dr.

**3. Mailing Office Address** 1208 Forest Cir.

Suite, Apt. #, etc.

**City & State** Orlando, Fl. 32810 Altamonte Springs, Fl.

**Zip** 32714

**4. Date Incorporated or Qualified To Do Business in Florida** 4-12-2000

**5. FEI Number** 59-3477797

**6. CERTIFICATE OF STATUS DESIRED**  \$8.75 Additional Fee required for a Certificate of Status

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**7. Name and Address of Current Registered Agent**

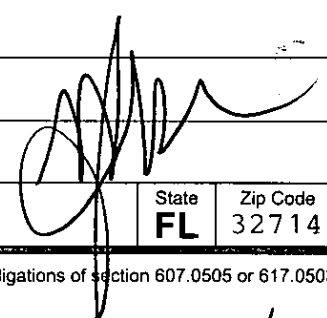
**Name** Maria Ledesma

**Street Address (P.O. Box Number is Not Acceptable)** 1208 Forest circle

**Suite, Apt. #, Etc.** Altamonte Springs, Fl. 32714

**City** Altamotne Springs, Fl.

**State** FL **Zip Code** 32714



**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** Maria Ledesma **Date** 1/30/02

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
TSD	Samuel Ledesma	6731 Edgewater Sr.	Orlando, Fl. 32810
PVD	Ninoska, Ledesma	1208 Forest Circ	Altamonte Spr Fl. 32714
S	MARIA Ledesma	1208 Forest Circle	Altamotne Springs, Fl

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 \*\*\*\*150.00 \*\*\*\*150.00

**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:** Maria Ledesma **Date** 1/30/02 **Daytime Phone #** 407-467-9771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/00)

&M Motors Inc.,  
6731 Edgewater Dr.  
Orlando, Fl. 32810

*2 add*

November 17, 2001

Mr. Mark Corvett  
Florida Department of State  
Annual Division of Corporations  
Box 6327  
Tallahassee FL.32314

Greetings:

As per our telephone conversation in regards to the report for the Corporation for J&M Motors, Inc. I explained that I send the report along with the appropriate fee. Apparently there was correspondence sent to us asking for our Federal Identification number, but we never received the correspondence.

Here is our Federal Identification number #59-3477797.

Unfortunately I failed to make a copy of the renewal I sent to your office so I cannot send you a signed copy.

Should you have any questions, please call me at 407-467-9771.

Yours truly,

*Maria Ledesma*

J&M Motors Inc.  
Maria Ledesma