

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
AND
FILED

01 DEC 28 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1012

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris,
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000045907

1. Corporation Name

J & E Terrascapes, Inc.

2. Principal Office Address

708 E 124th Ave

Suite, Apt. #, etc.

City & State

Tampa FL

Zip

33612

Country

USA

3. Mailing Office Address

708 E 124th Ave

Suite, Apt. #, etc.

City & State

Tampa FL

Zip

33612

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5/8/00

5. FEI Number

58-3036659

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

Monica Lawson

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

2403 State Street

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33609

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

Monica Lawson
REGISTERED AGENT MUST SIGN

Date 10/12/01

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
PD	Jayne Williams	708 E 124th Ave	Tampa, FL 33612
VSD	Erica Williams	708 E 124th Ave	Tampa, FL 33612

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:

Erica Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/17/01
Date

(813)
917-4038
Daytime Phone #

CR2E081 (9/00)



708 East 124th Avenue

Tampa, FL 33612

(813) 917-4038

2012

October 29, 2001

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

To Whom It May Concern:

We recently received a notice that our corporation had been administratively dissolved due to the fact that we had not completed our annual report. We are a new corporation and unfortunately did not realize that this report was due until the receipt of our dissolution which was our first notification that it was due. We have now researched and understand that our Annual Report is due on May 1st of every year whether or not we receive a notice prior to May 1st. Please accept our apologies. Enclosed you will find our Annual Report along with a check in the amount of \$150.00. If there are any questions or concerns please contact me at (813) 917-4038.

Thank you,

Erica Williams
Vice President