

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAY 21 AM 7:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P000000067838

1. Corporation Name

2. Principal Office Address

5648 SW 142 AVE.

3. Mailing Office Address

503 NW 208 Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft. Lauderdale

City & State

Ft. Lauderdale

Zip

33330

Country

USA

Zip

33029

Country

USA

600019679206

05/21/03--01047--006 **300.00

4. Date Incorporated or Qualified
To Do Business in Florida

7-17-2000

5. FEI Number

65-1031515

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$375 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JARED BURNSTAD

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

503 NW 208 Terr Ft. Lauderdale FL

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State

FL

Zip Code

33029

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

Jared Burnstad

REGISTERED AGENT MUST SIGN

Date

5-19-03

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
Pr.	Jared Burnstad	503 NW 208 Terr.	Ft. Lauderdale FL 33029
VP	Joy Burnstad	503 NW 208 Terr.	Ft. Lauderdale FL 33029

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:

Jared Burnstad

JARED BURNSTAD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954 6589866

CR2E081 (10/02)

252

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Reinstatement of Corporation

To Whom It May Concern:

I am writing in regards to the recent dissolution of our corporation. I did not receive any of the paperwork for the annual renewal of our corporation. I apologize for any inconvenience that this may cause to your office but I have just learned of this dissolution by information I received from Dun & Bradstreet.

I went on to the Sunbiz site today and have spoken with several representatives about this matter. I am enclosing a check for \$250.00 for reinstatement of our corporation.

Sincerely yours,

Jared Burnstad
m.h.

Jared Burnstad
President
JDB Interiors, Inc.
503 NW 208th Terrace
Pembroke Pines, FL 33029