PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. POSC / 1/3 FLORIDA DEPARTMENT OF STATE Katherine Harris FILED Secretary of State DIVISION OF CORPORATIONS Nov 27, 2001 8:00 A.M. P00000081471 **DOCUMENT # Secretary of State** 1. Corporation Name J. VISHINO SERVICES, INC. Principal Place of Business Mailing Address 760:SE 2ND AVE...BLDG. C206 760 SE 2ND AVE., BLDG, C206 DEERFIELD BCH FL 33441 DEERFIELD BCH FL 33441 4/01 90105 629 150,00 If above addresses are incorrect in any way, line through incorrect information and enter correction below 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 08/24/2000 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Zip ---CERTIFICATE OF STATUS DESIRED⁻⊡ 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Title(s) City / State / Zin D VISHINO, JEFFREY 760 SE 2ND AVE., BLDG. C206 **DEERFIELD BCH FL 33441** 8. Name and Address of Current Registered Agent 9. Name and Address of New Red Name VISHINO, JEFFREY S Street Address (P.O. Box Number is Not Acceptable 760 SE 2ND AVE., BLDG. C206 Suite, Apt. #, Etc. DEERFIELD BCH FL-33441---Zip Code State 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. 11-12-01 REGISTERED AGENT MUST SIGN 11. 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 of the corporation of the corporat on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Silve Jeffrey S Vishin U 11-2-0/
ED NAME OF SIGNING OFFICER OR DIRECTOR
Date

SIGNATURE:

pagerit

J. Vishino Services, Inc. 700 S.E. 2<sup>nd</sup> Avenue, Building C206 Deerfield Beach, FL 33441 (954) 803-6308

October 15, 2001

To Whom It May Concern:

I have recently received your "Certificate of Administrative Dissolution of Revocation" for J. Vishino Services, Inc. My company filed the 2001 Uniform Business Report (UBR) on March 30, 2001. I am inclosing a copy of the UBR report and a copy of the Check cash on April 4, 2001. I am requesting the J. Vishino Services, Inc. being reinstated.

Thank you,

Jeffrey Vishino, President

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

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J. Vishino Services, Inc. 700 S.E. 2<sup>nd</sup> Avenue, Building C206 Deerfield Beach, FL 33441 (954) 803-6308

November 18, 2001

To Whom It May Concern:

I did not receive the letter dated 4-5-01.

Thank you.

Jeffrey Vishino, President

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