PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORAT	12 Con 12	FLORIDA DEPAR Secretar DIVISION OF C	y of S	State		FIL.E O7MAYI7 A	
DOCUMENT # P0000088520 1. Corporation Name					ALLAMASSEE, FLORIDA		
Jeral Beverage, Inc.							
2. Principal Office Add 7305 Kea	3. Mailing Office Addre	Office Address)X 740384		REIN	ISTATE CR2E081	EMENTOS-	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	i, etc.			orated or Qualified	/18/2000	
City & State Boynton Be	Boynton Beach, Fl.		To Do Business in Florida 9/18/2000 Applied For Not Applicable				
^{Zip} 33437	B7 USA Zip 33474-0		ÜS		6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Additional Fee required (for a Certificate of Status
7. Name and Address of Current Registered Agent						· · · · · · · · · · · · · · · · · · ·	
Jerome Zir 7305 Kea I Suite, Apt. #, Etc.	nmerman Zanî Drîvê	le)			The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.		
Boynton Beach, Fl.			FL 33437°				
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							
9. Names and Street Addresses of Each officer and/or Director (Fiorida nonprofit corporations must list at least						<u> </u>	
Titles	Name of Officers and/or Director	75	Street Address of Each Officer and/or Director			City	/ State / Zip
PRES, JER	TERONE ZIMMERMAN 7305 KENLANI				DRIVE	BOTHEON	- 33437
					71 05/31	010360 07-01020-0	15387 11 08450.00
	RE	EINSTATEM	EN1	<u> </u>	05/3	201226 1/0701020-	05387 -012 **8.75
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 filling 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 contained in Chapter 119, 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 Date Date Description for 17, F.S. I further certify that when filling this 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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Description 1970 1970 1970 1970 1970 1970 1970 1970							

JC 5/25



May 2, 2007

JERAL BEVERAGES, INC. P.O. BOX 740384 BOYNTON BEACH, FL 33474-0384 US

SUBJECT: JERAL BEVERAGES, INC.

Ref. Number: P00000088520

We have received your document for JERAL BEVERAGES, INC. and check(s) totaling \$8.75. However, your check(s) and document are being returned for the following:

Please be advised the above referenced corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2005 corporate annual report form. Our records indicate the 2005 annual report was returned by the U.S. Postal Service as undeliverable. Therefore, we can waive the reinstatement fee; only the report fees for each year are required to make the corporation active.

The total amount required is \$450.00. Add an additional \$8.75 for each certificate of status requested.

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.

Tyrone Scott Document Specialist

Letter Number: 907A00030600