

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

04 JAN -9 PM 12:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000025131

**1. Corporation Name**

JUMALICO INC

400026586944  
01/09/04--01022--006 \*\*150.00

REINSTATEMENT 03

**2. Principal Office Address**

707 E 9 STREET

**3. Mailing Office Address**

707 E 9 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIALEAH, FL

City & State

HIALEAH, FL

Zip

33010

Country

USA

Zip

33010

Country

USA

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

03/09/01

**5. FEI Number**

59-3713527

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

Julio Gomez

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

707 East 9 Street

Suite, Apt. #, Etc.

City

Hialeah

State

FL

Zip Code

33010

**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

*Julio Gomez*  
REGISTERED AGENT MUST SIGN

Date 12/19/2003

**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
P	Julio Gomez	707 East 9 Street	Hialeah, FL 33010

**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:

*Julio Gomez* President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/19/2003

Date

Daytime Phone #

CR2E081 (10/02)

December 19, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: P01000025131

Attn: Renewal Dept:

Gentlemen:

In reference to the above mentioned corporation, please be advised that we never received the renewal notice.

We contacted your renewal department and they advised us to write a letter and specify what happened and to submit the original annual fee and you would renew the corporation.

Your cooperation in this matter is anticipated and appreciated.

Thank you,

A handwritten signature in black ink, appearing to read "Julio Gomez". The signature is fluid and cursive, with the first name "Julio" being more prominent than the last name "Gomez".

Julio Gomez  
President