

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P01000025188

1. Entity Name
JERITSA, INC.



FILED

08 NOV -7 PM 3:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 8221 GLADES RD 7FA BOCA RATON, FL 33434	Mailing Address %YANDUN 801 S FEDERAL HWY #101 POMPANO BEACH, FL 33062
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2. Principal Place of Business - No P.O. Box # 801 S FEDERAL HWY	3. Mailing Address
Suite, Apt. #, etc. 101	Suite, Apt. #, etc.

10282008 REIN-P CR2E098 (1/07)

City & State POMPANO BEACH FL	City & State	4. FEI Number 22-3789529	Applied For <input type="checkbox"/> Not Applicable
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Zip 33062	Country USA	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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<p>6. Name and Address of Current Registered Agent</p> <p>YANDUN, WILMA 801 S FEDERAK HWY #101 POMPANO BEACH, FL 33062</p>	<p>7. Name and Address of New Registered Agent</p> <p>Name</p> <p>Street Address (P.O. Box Number is Not Acceptable)</p> <p>801 S FEDERAL HWY #101</p> <p>City FL Zip Code</p>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE: *Wilma Yandun* 11/08/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<p>FILE NOW!!! FEE IS \$150.00 After January 1, 2009, Fee will be \$300.00</p>	<p>In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.</p>
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<p>10. OFFICERS AND DIRECTORS</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 60%;"> DP YANDUN, WILMA 801 S FEDERAL HWYL #101 POMPANO BEACH, FL 33062 </td> <td style="width: 10%; text-align: right;"> <input type="checkbox"/> Delete </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YANDUN, WILMA 801 S FEDERAL HWYL #101 POMPANO BEACH, FL 33062	<input type="checkbox"/> Delete																						<p>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 60%;"> 800137735798 11/07/08--01008--013 **150.00 </td> <td style="width: 10%; text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table> <p style="text-align: center; font-size: 2em; font-weight: bold;">REINSTATEMENT</p> <p style="text-align: center; font-size: 2em;"><i>[Signature]</i></p>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800137735798 11/07/08--01008--013 **150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition																					
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wilma Yandun* 11/03/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #