

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

142

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 JUN 16 PM 1:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000040972

1. Corporation Name

CHRISTOPHER R. JETTE, P.A.

2. Principal Office Address

515 North Flagler Drive

Suite, Apt. #, etc.

#910

City & State

West Palm Beach Florida

Zip

33401

Country

U.S.A.

3. Mailing Office Address

515 North Flagler Drive

Suite, Apt. #, etc.

#910

City & State

West Palm Beach Florida

Zip

33401

Country

U.S.A.

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

4/18/2001

5. FEI Number

651095388

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

Jette Christopher R.

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

515 North Flagler Drive

Suite, Apt. #, Etc.

Suite 910

City

West Palm Beach

State  
FL

Zip Code  
33401

700076640337  
06/27/06 01037 007 \*\*453.75

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

REGISTERED AGENT MUST SIGN

Date June 15, 2006

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
D	Christopher R. Jette	515 North Flagler Drive #910	West Palm Beach, FL 33401

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 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

Christopher R. Jette

Date

6/15/2006

Daytime Phone #

(561) 654-0202

292

*Law Offices Of*  
**GOLDSTEIN & JETTE, P.A.**

IAN J. GOLDSTEIN\*  
CHRISTOPHER R. JETTE  
\*ALSO ADMITTED IN DISTRICT OF COLUMBIA

NORTHBRIDGE CENTRE  
515 NORTH FLAGLER DRIVE  
SUITE 910  
WEST PALM BEACH, FL 33401

TEL: (561) 659-0202  
FAX: (561) 659-0133

WEBSITE:  
[www.goldsteinjette.com](http://www.goldsteinjette.com)

June 15, 2006

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

**Re: Letter concerning Reinstatement of Corporation**

To whom it may concern:

This letter is intended to confirm that my corporation did not receive its annual report notices in the years 2003, 2004, 2005 or 2006. I believe the reason is your files are reflecting an old address that changed in 2003.

Please accept my apologies for the failure to timely file under these circumstances.

The name of the corporation is CHRISTOPHER R. JETTE, P.A. The document number is P01000040972. The FEI Number is 651095388.

According to the instructions I have enclosed \$458.75 according to the schedules set forth in the instructions accompanying the reinstatement form.

Thank you in advance for your anticipated cooperation.

Very truly yours



CHRISTOPHER R. JETTE