

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 APR -5 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000003756

1. Corporation Name

J.T. Nicks AND ASSOCIATES INC.

2. Principal Office Address

801 Beickell Avenue

Suite, Apt. #, etc.

9th Floor

City & State

Miami, Fl.

Zip

33131

Country

3. Mailing Office Address

10225 SW 34 Street

Suite, Apt. #, etc.

City & State

Miami, Fl.

Zip

33165

Country

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

1/11/2002

5. FEI Number

26-0010589 (TAX ID)

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

Orlando Jr. Miguez

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

10225 SW 34 Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33165

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

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
PD	Orlando Miguez Jr.	10225 SW 34 Street	Miami, Fl. 33165

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/04
Date

(305) 218-8102
(305) 485-1597
Daytime Phone #

282

3/30/2004

J.T. NICKS & ASSOC. INC.
DOCUMENT # P02000003756

RE: WAIVER OF FEE FOR REINSTAMENT

DEAR SIRs,

THIS LETTER IS A PETION ON BEHALF OF J.T. NICKS & ASSOCIATES INC.
FOR A WAIVER OF THE FEE FOR REINSTATEMENT OF THE CORPORATION,
DUE TO THE NON-RECEIPT OF THE NOTICE TO FILE THE UNIFORM
BUSINESS REPORT.

ENCLOSED YOU WILL FIND A CHECK FOR A TOTAL OF \$308.75. THIS IS FOR
THE 2003 UNIFORM FEE REPORT (\$150.00) , AS WELL AS THE 2004 UNIFORM
BUSINESS REPORT (150.00) AND (\$8.75) FOR THE 2004 CERTIFICATE OF
STATUS.

THANK YOU,



ORLANDO MIGUEZ, PRESIDENT
J.T. NICKS & ASSOCIATES, INC.