

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000032190

1. Corporation Name

C & J EXPRESS SERVICES, INC.

Principal Place of Business

554 NW 54TH STREET  
MIAMI FL 33127

Mailing Address

554 NW 54TH STREET  
MIAMI FL 33127

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/25/2002

5. FEI Number

CA-1086628

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	JEUDY, YVES J SR.	12461 SW 1ST COURT	PLANTATION FL 33325
V	BLAISE, DENISE	100 NE 187TH STREET	NORTH MIAMI BEACH FL 33179
D	EXANTUS, CAROLE	12461 SW 1ST COURT	PLANTATION FL 33325
S	JEUDY, CINDY	100 NE 187TH STREET	NORTH MIAMI BEACH FL 33179
D	JEUDY, YVES JR.	100 NE 187TH STREET	NORTH MIAMI BEACH FL 33179

8. Name and Address of Current Registered Agent

JEUDY, YVES J  
554 NW 54TH STREET  
MIAMI FL 33127

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Numbers Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/09/03

11. 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  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/09/03 305300-1199

**C & J EXPRESS SERVICES, INC.**  
**554 NW 54<sup>th</sup> STREET**  
**MIAMI, FLORIDA 33127**  
**TELEPHONE (305) 757-6536**  
**FAX NUMBER (305) 759-6654**

October 13, 2003

**TO WHOM IT MAY CONCERN:**

Please be advised, that **C & J EXPRESS SERVICES, INC.** had not received the prior Uniform Business Report notices. Therefore, we request for the reinstatement fee to be waived at this time. However, we are very sorry about the inconvenient/delay. Thanks! for your anticipation to this matter.

SINCERELY,



**YVES JEUDY, President.**