

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 APR 11 AM 8:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000047854

**1. Corporation Name**

JMB MARBLE STONE INC.

**2. Principal Office Address**

30 SOUTH SHORE DR.

Suite, Apt. #, etc.

APT 7

City & State

MIAMI BEACH

Zip

FL

Country

33141

**3. Mailing Office Address**

30 SOUTH SHORE DR.

Suite, Apt. #, etc.

APT 7

City & State

MIAMI BEACH

Zip

FL

Country

33141

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

**5. FEI Number**

01-0683360

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

MFR E. ASSOCIATES INC.

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

220 71 STREET SUITE 209

Suite, Apt. #, Etc.

City

MIAMI BEACH

State

FL

Zip Code

33141

**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

4/10/06

**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	JORGE MIRANDA	30 SOUTH SHORE DR.	MIAMI BEACH FL 33141
			000070468080 04/14/06--01064--009 **150.00
			000070468080 04/14/06--01064--010 **150.00

**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:**

JORGE MIRANDA.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/10/06

Daytime Phone #

CR2E081 (01/05)

NATP MEMBER

***MFR & Associates***

AICPA MEMBER

**ACCOUNTANTS & CONSULTANTS**

220 71ST STREET SUITE 212  
MIAMI BEACH, FL 33141

TELEPHONE: (305) 864-7706  
FACSIMILE: (305) 864-7960

April 10, 2006

FL Dept. of State  
Fl. Div. Of Corp.

RE: JMB MARBLE STONE INC.  
Doc # P02000047854

Dear Sir or Madam:

I am writing to you on behalf of JMB MARBLE STONE INC. to request a waiver of penalties associated with the reinstatement of this corporation. This request is based on the fact that this entity, our office or their attorney did not receive a preprinted form from the State.

Enclosed please find a copy of the form for the year 2005 & 2006, we obtained from the internet and a check for \$300.00. The company has made a good faith effort to meet the state's filing requirements.

I thank you in advance for your help,

Sincerely,



Manuel Fernandez  
Tax Advisor