

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 # P02000048160

1. Corporation Name

SAXJ.A.M., INC.

Principal Place of Business

7418 ANSLEY DRIVE  
LAKE WORTH FL 33467

Mailing Address

7418 ANSLEY DRIVE  
LAKE WORTH FL 33467

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

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City &amp; State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/02/2002

5. FEI Number

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)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director	4. City / State / Zip
PTD	MICHALAK, JOHN A	7418 ANSLEY DRIVE	LAKE WORTH FL 33467
SVD	LARENAS-MICHALAK, CLAUDIA M	7418 ANSLEY DRIVE	LAKE WORTH FL 33467

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI FL 33145

9. Name and Address of New Registered Agent

Name JOHN Michalak  
Street Address (P.O. Box Number is Not Acceptable)  
7418 ANSLEY DRIVE  
Suite, Apt. #, Etc.

City Lake Worth

State FL

Zip Code 33467

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 1/28/04

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:

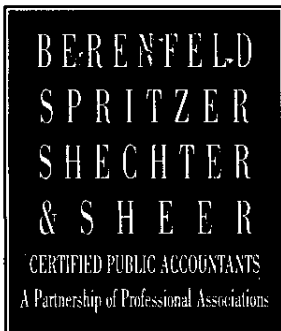
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/28/04

Daytime Phone #

561-649-7767



January 21, 2004

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: SAXJ.A.M., Inc.  
Doc. # P02000048160  
Tin # 03-0446195  
Uniform Business Report 2002-2003

To Whom It May Concern:

The above referenced Corporation has asked us to respond with you on their behalf. The taxpayer has just recently discovered that their Uniform Business Report (UBR) for 2002-2003 was inadvertently never filed. The corporation's mailing address and the registered agent's mailing address were both changed. We believe that this is the reason that the Corporation did not timely file their UBR report 2003.

This Corporation has never had a problem in the past with the timely filing and payment of their corporate annual report and filing fees.

Based on the above we respectfully request that you accept the enclosed filing and \$150 payment for 2003 of their annual fee as timely filed.

If you should have any questions, please do not hesitate in calling.

Very truly yours,

~~BERENFELD, SPRITZER, SHECHTER & SHEER~~

Emery B. Sheer,  
Certified Public Accountant

Enclosure  
cc: SAXJ.A.M., Inc.

REPLY:

MIAMI OFFICE

9655 South Dixie Hwy., Third Floor, Miami, Florida 33156  
Telephone: (305) 274-4600 Telefax: (305) 274-4601

WESTON OFFICE

2237 N. Commerce Parkway, Suite 3, Weston, Florida 33326  
Telephone: (954) 370-2727 Telefax: (954) 370-2776