

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000057029

1. Entity Name
J & R OF PALM BEACH, INC.



FILED

04 OCT 21 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
11586 PIERSON RD., L9-10
WELLINGTON, FL 33414

Mailing Address
11586 PIERSON RD., L9-10
WELLINGTON, FL 33414

2. Principal Place of Business
3541 Martin Luther King Jr.
Suite, Apt. #, etc.
Unit C

3. Mailing Address
3541 Martin Luther King Jr. Blvd
Suite, Apt. #, etc.
Unit C



REINSTATEMENT

City & State
Riviera Beach, FL

City & State
Riviera Beach, FL

Zip
33404

Country
Palm Beach

Zip
33404

Country
Palm Beach

4. FEI Number
04-3668864

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SURPRISE, JEFFREY
11586 PIERSON RD., L9-10
WELLINGTON, FL 33414

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Jeffrey A. Surprise*

(NOTE: Registered Agent signature required when reinstating)

DATE: 10/17/04

FILE NOW!!! FEES \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST SURPRISE, JEFFREY 11586 PIERSON RD., L9-10 WELLINGTON, FL 33414	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SURPRISE, JEFFREY 11586 PIERSON RD., L9-10 WELLINGTON, FL 33414	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FREER, HERBERT 16115 TANGERINE BLVD LOXAHATCHEE, FL 33420	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
600042064336 10/21/04--01033--011 **150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jeffrey A. Surprise*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: 10/17/04

DAYTIME PHONE #: (561) 204-1100