

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 28, 2003 8:00 A.
Secretary of State

DOCUMENT # P 02000079313

1. Corporation Name

JUDIE LAMIA, INC

2. Principal Office Address

2835 LIVINGSTON LN

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

Zip

33411

PALM BEACH

3. Mailing Office Address

2835 LIVINGSTON LN

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

Zip

33411

Country

PALM BEACH

REINSTATEMENT

200024340802
10/31/03--01088--002 \$150.00

4. Date Incorporated or Qualified
To Do Business in Florida

7/22/02

5. FEI Number

38-3655358

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

JUDIE LAMIA

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

2835 LIVINGSTON LANE

Suite, Apt. #, Etc.

City

WEST PALM BEACH

State

FL

Zip Code

33411

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

10/21/03

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	JUDIE LAMIA	2835 LIVINGSTON LN	WEST PALM BEACH, FL 33411

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)(f), 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:

JUDIE LAMIA

Date

10/27/03

Daytime Phone #

C.R. COOPER, CPA, PA
5350 10TH. Ave. North, Suite 8
Lake Worth, Florida 33463

American Institute of
Certified Public Accountants

(561) 964-6927
(561) 432-0008

Florida Institute of
Certified Public Accountants

FAX (561) 433-3596

October 27, 2003

Division of Corporations
Uniform Business Report Filings

P.O. Box 6327
Tallahassee, Florida 32314

Taxpayer: Judie Lamia, Inc
FEIN: 38-3655358
Document #: P02000079313
Tax Form: UBR
Tax Period: 2003

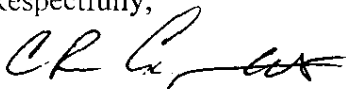
To Whom It May Concern:

We have enclosed check # 6706 in the amount of \$150.00 for the annual renewal of the above corporation.

Please abate the penalty as Ms Lamia did not receive the original UBR, and did not intentionally avoid the filing fee. The corporation is fairly new and, therefore, Ms Lamia is not completely familiar with the UBR.

Thank you for your prompt attention to this matter. Please contact our office if any further information or explanation is required.

Respectfully,


C. R. Cooper, CPA

Encl.

cc