

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

03 NOV 10 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000092820

1. Corporation Name

JAAS AUTO SALES, INC.

Principal Place of Business

11311 SOONER DR
CLERMONT FL 34711

Mailing Address

11311 SOONER DR
CLERMONT FL 34711

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 & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/27/2002

5. FEI Number

020639824

Applied For

Not Applicable

6

CERTIFICATE OF STATUS DESIRED ☐

\$6.75 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
PSTD	LEADER, JEFFREY N	11311 SOONER DR	CLERMONT FL 34711 Clermont

8. Name and Address of Current Registered Agent

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

9. Name and Address of New Registered Agent

Name

Jeffrey N Leader

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

11311 Sooner Drive

Suite, Apt. #, Etc.

City

Clermont

State

FL

Zip Code

34711

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

Jeffrey N Leader
REGISTERED AGENT MUST SIGN

Date

10/8/03

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:

Jeffrey N Leader
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/8/03
Date

321-229-6002
Daytime Phone #

CR2E040 (7/03)

November 6, 2003

Mr. Justin M. Shivers.
Florida Department of Revenue
Divisions of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Dear Mr. Shivers:

My husband and I were unaware of the annual renewal process for our corporation (we incorporated our company last year). We received the enclosed form on October 8 and I called your office and spoke with an individual that advised me to mail in the form along with a check for \$150.00 and that the \$600.00 would be waived. I was not informed to send in a letter asking for the renewal fee to be waived. JAAS Auto Sales, Inc. is requesting that the reinstatement fee of \$600.00 be waived.

I have noted the renewal process for our future reference and will be sure to follow the process for reinstatement next year.

Thank you,

A handwritten signature in cursive script, appearing to read "Sally A. Leader", with a long horizontal flourish extending to the right.

Sally A. Leader
JAAS Auto Sales, Inc.