PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## CORPORATION



## FLORIDA DEPARTMENT OF STATE Secretary of State

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

REIN	STATEMENT		DIVISION OF CORPORAT	TIONS	04 JUN 30 AM 8: 00
DOC	JMENT # POA				
		ay Developr	ll l		
	12159 5	W 132 md	Court, Suite 102	<u>'</u>	
	miami,	FLA 331	86		·- <b>·</b> ·- · · · · · · · · · · · · · · · ·
2. Principal Office Address		<b>3.</b> M	ailing Office Address	REIN	STATEMENT <u>03-04</u>
12159 SW 1322 Court		rt		137-212	Ola International Control
Suite, Apt. #, etc.			Apt. #, etc.		<u> </u>
5-102					orporated or Qualified usiness in Florida 9/24/02
City & State		City &	State	5. FEI Num	
MIA	11 _FLA				S - 218-1488 - Not Applied For Not Applicable
Zip	Country	Zip	Country	6.	
<u> 3318</u>	b U.S.			CERTIFICA	ATE OF STATUS DESIRED S375 Additional Repropulted Continue to of Status
			7. Name and Address of	f Current Registered Agent	
	Name  Jose Martinez				
	Street Address (P.O. Box Number is Not Acceptable)				
		W 132 Nd	Court		
	Suite, Apt. #, Etc.	ה כת		. •	
	City MIAMI_	<i>U 8</i> -			State Zip Code FL 3 3/86
8. I. being	·	of the above name	ed corporation, am familiar wit	th and accept the obligations of se	
Signature o Registered	r 2	MU	RED AGENT MUST SIGN		Date 6/23/04
9. Names	s and Street Addresses of Each			ations must list at least 3 directors)	_ <del></del>
Titles	Name of Officers and/or Directors			eet Address of Each icer and/or Director	City / State / Zip
<i>D</i>	Martinez, 5	Martinez, Jose R.		N 132nd Court	Miami, FC 33186
		· ,	_	Suite 103	2
		•		_8(	00039084828 4/0401005017 **300.00
				07/14	1 <del>704011005017 **300.00</del>

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 of 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 party legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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June 23, 2004

Secretary of State Florida Department of State R.A. Gray Building 500 S. Bronough Tallahassee, FL 32399-0250

RE: Jay & Jay Development Group, Corp. 12159 SW 132<sup>nd</sup> Court, Ste. 102

Miami, FL 33186 FEIN: 35-2181488

Ref. No.: P02000095218

Dear sir/madam:

This letter is in response to your notice of dissolution. We kindly ask the State of Florida to reinstate Jay & Jay Development Group, Corp. (EIN 35-2181488) corporate status for the following reason:

• The corporation had a change of address and never received the Uniform Business Report. Therefore, he was unaware and uniformed and did not pay his corporate filing fees for years 2003 and 2004.

We thank you in advance and appreciate your consideration in this matter. If you have any further questions, please contact our office at (305) 595-1783 x. 267.

Sincerely

Jose Martinez, President

Jay & Jay Development Group, Corp.