		PLEASE READ	ALL INSTR	UCTIONS B	EFORE C	OMPLET	NG THIS	FORM.	19	2
-	PORATION STATEM	100	Se Se	EPARTMENT (cretary of State on of corporation	•			FILED 19 AMI2	: 43	
DOCUMENT # PO2000/1675 1. Corporation Name JEJ Roof. parring permodeling Contractor w						TALLAHASSEE, FLORIDA				
Suite, Apt. # Mux City & State	2000V	28 court - FL.	Suite, Apt. #, etc	e Address	ourt	4. Date incon	porated or Quali liness in Florida	fied 20	2 0 2 Appl	ied For
330 Zip	723	Country B Ward.		Country	turrent Register	·	1477 E OF STATUS DES		Not Additional F a Certificate	
	Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 20211 NE 10 Th Place Suite, Apt. #, Etc. State Zip Code FL 33179									
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										
9. Names and Street Addresses of Each Officer and/or Director (Flo Name of Officers and/or Directors			ors	Street Address of Each Officer and/or Director			City/State/Zip Mygama FL 33023			
	Lacq	Jes Mucs		>///5W	78 Ca.	-1/0- 1 (06/0)	110103 104-010	75231 173005		
10. Learlife	y that I am an	officer or director or the r	ocaiver or trustee emp	owered to execute th	s application es	provided for in ch	apter 607 or 617	7. F.S. I further ce	ntify that who	en filing
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 filling 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 Date										

Allachment

May 11, 2004

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Re-instated my Corporation, J & J Rood Painting & Remodeling Contractors, Inc.

To whom it may concern,

I recently found out that my corporation was Administratively Dissolved on 9/03 and also that I should have paid my fee of \$150.00 at the end of 2002 or by May 31, 2003.

I realized that I never received the 2003 Uniform Business Report and when I contacted the State by phone they suggested that I write this letter explaining that I never received the form and file a new 2003 Uniform Business Report that I could retrieve off the Internet at www.Sunbiz.org, which I did.

Enclosed is my check for the \$300.00 with my completed Report that I should have sent in prior to May 31, 2003.

Thank you for your help in this matter.

Sincerely,

Jacques Marcellus, President

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