

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

STATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAY -6 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000122709

1. Corporation Name

JOSSBELL TRADE, INC.

2. Principal Office Address

1920.NW 93 TERRACE

3. Mailing Office Address

1920.NW 93 TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

Zip

33071

Country

US

Zip

33071

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida 11/14/2002

5. FEI Number

51-0424402

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

MARIA CARDONA

Street Address (P.O. Box Number is Not Acceptable)
1920 NW 93 TERRACE

Suite, Apt. #, Etc.

City

CORAL SPRINGS

State

FL

Zip Code

33071

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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 May 03 / 2004

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	MARIA CARDONA	1920 NW 93 TERRACE	CORAL SPRINGS, FL 33071

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)(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:

MARIA CARDONA

May 03 / 2004 754 245 0577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)

JOSSBELL TRADE, INC.
1920 NW 93rd Terrace
Coral Springs, FL 33071

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: P02000122709

To Whom It May Concern:


It has just come to my attention that my corporation has been dissolved for not filing a 2002 Annual Report.

My mailing address has changed and I never received my renewal documents.

Enclosed is a reinstatement form that I have filled out with my updated address information as well as a check for \$300.00 in order to cover the filing fees for 2002 and 2003.

Please accept this in full satisfaction of my filing requirements and abate any penalty that I may be assessed.

Thank you,



Maria Cardona
President