

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000033433

1. Entity Name
JOVI INVESTMENTS, INC.



FILED

04 DEC -6 PM 4: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



12012004 REIN-P CR2E098 (6/04)

Principal Place of Business
3440 HOLLYWOOD BLVD., STE. 360
HOLLYWOOD, FL 33021

Mailing Address
3440 HOLLYWOOD BLVD., STE. 360
HOLLYWOOD, FL 33021

2. Principal Place of Business
18851 NE 29th Ave

3. Mailing Address
18851 NE 29th Ave

Suite, Apt. #, etc.
Ste # 900

Suite, Apt. #, etc.
Ste # 900

City & State
Aventura, FL

City & State
Aventura FL

Zip
33180-2808

Country
USA

Zip
33180-2808

Country
USA

4. FEI Number
20-0584342

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROUSSO, MARK E ESQ.
3440 HOLLYWOOD BLVD., STE. 360
HOLLYWOOD, FL 33021

Name
ROUSSO, MARK E. ESQ.
Street Address (P.O. Box Number is Not Acceptable)
18851 NE 29th Ave
STE # 900
City
Aventura FL Zip Code
33180-2808

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12/1/04

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RD
GERONIMO A., VICENZO D
3440 HOLLYWOOD BLVD., STE. 360
HOLLYWOOD, FL 33021 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RD
Geronimo A., Vicenzo D
18851 NE 29th Ave Ste #900
Aventura, FL 33180-2808 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DI GERONIMO, ELSA ADELINA B
3440 HOLLYWOOD BLVD., STE. 360
HOLLYWOOD, FL 33021 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
DI GERONIMO, ELSA ADELINA B
18851 NE 29th Ave Ste #900
Aventura, FL 33180-2808 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
ALVAREZ, VICTOR JOSE D
3440 HOLLYWOOD BLVD., STE. 360
HOLLYWOOD, FL 33021 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
DI GERONIMO ALVAREZ, VICTOR JOSE
18851 NE 29th Ave Ste #900
Aventura, FL 33180-2808 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400043213254
12/06/04--01047--011 ***150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-1-04 (305) 948-8435

Date

Daytime Phone #