

10fz

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03000068906

1. Corporation Name

J.HERRERA ENTERPRISES CORP.

2. Principal Office Address

12751 N.W 11 STREET

Suite, Apt. #, etc.

City & State

MIAMI FL

Zip

33182

Country

USA

3. Mailing Office Address

12751 N.W 11 STREET

Suite, Apt. #, etc.

City & State

MIAMI FL

Zip

33182

Country

USA

FILED

07 JAN -8 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600084093896

01/12/07--01003--019 **300.00

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

06/20/2003

5. FEI Number

81-0619899

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 LUNA

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

12751 N.W 11 STREET

Suite, Apt. #, Etc.

1

City

MIAMI

State
FL

Zip Code

33182

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 01-02-07

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 |
|--------|--------------------------------------|---|--------------------|
| D | JORGE HERRERA | 12751 N.W 11 STREET | MIAMI FL 33182 |
| | | | |
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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 contained in Chapter 119, 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

01/02/07

Date

Daytime Phone #

2012

January 02, 2007

Dear,
Florida Department of State, Division of Corporations.

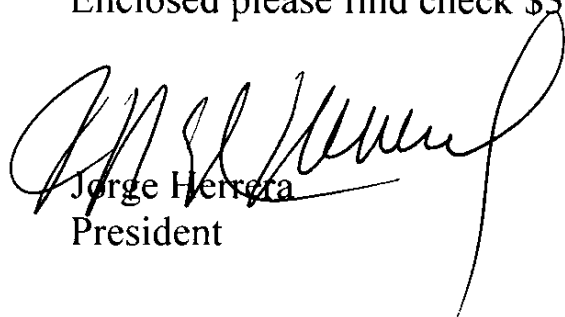
This is a letter to inform you that J. HERRERA ENTERPRISES CORP., has never received the ANNUAL REPORT 2005 and 2006.

Because when it was filed it had other address.

Old address: 4647 N.W 97 Place Miami Fl 33178

Mailing Office Address: 12751 N.W 11th Street Miami Fl 33182

Enclosed please find check \$300.00



Jorge Herrera
President