P03000130623

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SECRETARY OF STATE DIVISION OF CORPORATIONS

05 JUL -5 PM 3:47

Voltis, Willots
On 106 105

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DISSOLUTION OF	A CORPORATION.
DOCUMENT NUMBER: PO 300	0130623
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning to	his matter to the following:
JUMAR BELFFI	the state of the s
JB GENERAL SER	EVICES INC.
(Name of Fi	rm/Company)
640 CYPRESS CLUB WA	ress) # 0.
(Add	ress)
POMPANO BEACH FL (City/State/	33064
(City/State/	and Zip Code)
For further information concerning this matte	r, please call:
JUMAR BELFFI (Name of Person)	at (954) 579 6434 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	409 E. Gaines Street

Tallahassee, Florida 32399

Tallahassee, Florida 32314



May 12, 2005

JUMAR BELFFI JB GENERAL SERVICES, INC. 640 CYPRESS CLUB WAY #0 POMPANO BEACH, FL 33064

SUBJECT: JB GENERAL SERVICES, INC.

Ref. Number: P03000130623

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

ARTICLES OF REVOCATION OF DISSOLUTION CAN NOT BE FILED TO AN ACTIVE CORPORATION. IF YOU WISH TO DISSOLVE THE CORPORATION, PLEASE COMPLETE THE ATTACHED FORM AND RETURN TO OUR OFFICE FOR FILING.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Letter Number: 305A00034319

Darlene Connell Document Specialist

RECEIVED

11. CHICA OF CORPORALICATION

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	JB GENERAL SERVICES, INC.	
SECOND:	The document number of the corporation (if known): P03000 130623	
THIRD:	The file date the articles of incorporation: $11/12/63$	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	3
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	05 JUL -5 KM 3 4
SEVENTH:	Adoption of Dissolution (CHECK ONE)	7.4
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Si	igned this 19 day of JUNE 2005.	
Sign	ature: (By a director, president or other officer) It directors or officers have not been selected, by an incorporator - in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	f
	TUMAR BECFF: (Typed or printed name of person signing)	
	Title of person kigning)	

Filing Fee: \$35

SECRETARY OF STALL DIVISION OF CORPORATIONS

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

_		GENERAL		•		
pate of dissolution pecified in the A		late the dissolution is a olution.	illed with the De	epartment of State (or as	
Description of inf	ormation that	must be included in a	claim:			
NONE						
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Mailing address w	here claims c	an be sent: (Claims ca	innot be sent to t	the Division of Cor	porations)	
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A claim against th within 4 years afti		ed corporation will be f this notice.	barred unless a	proceeding to entor	ce the claim is co	mmence
.T.		2-15-		0	10	
<u> </u>	人円(し Printed Name o	BELFF: f the Person Filing		Signature of t	he Person Filing	