## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000136190

Entity Name: JJT REAL ESTATE DEVELOPMENT, INC.

**FILED** Aug 23, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

203 JACARANDA DR 2718 SHERIDAN STREET PLANTATION, FL 33324 HOLLYWOOD, FL 33020 US

**Current Mailing Address: New Mailing Address:** 

203 JACARANDA DR 2718 SHERIDAN STREET PLANTATION, FL 33324 HOLLYWOOD, FL 33020 US

FEI Number: 13-4269625 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. JOSEPH SCIARROTTA 1840 SW 22 ST 4 FLR 2718 SHERIDAN STREET MIAMI, FL 33145 US HOLLYWOOD, FL 33020

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.

SIGNATURE: JOSEPH SCIARROTTA 08/23/2005

> Electronic Signature of Registered Agent Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition SCIARROTTA, JOSEPH SCIARROTTA, JOSEPH Name: Name: 203 JACARANDA DR 2718 SHERIDAN STREET Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: HOLLYWOOD, FL 33020 US

DV Title: (X) Change ( ) Addition Title: () Delete

Name: QUALLEY. Name: SCIARROTTA, JOSEPH A 203 JACARANDA DR 2718 SHERIDAN STREET Address: Address: PLANTATION, FL 33324 HOLLYWOOD, FL 33020 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: DT DT (X) Change ( ) Addition

GILLESPIE, TOM LYON, KRISTY Name: Name:

203 JACARANDA DR 2718 SHERIDAN STREET Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: HOLLYWOOD, FL 33020 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH SCIARROTTA **DPS** 08/23/2005