

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P04000114881

1. Corporation Name

JESSEL TELECOMMUNICATIONS CORPORATION

2. Principal Office Address - No P.O. Box #

20030 NE 21ST AVENUE

Suite, Apt. #, etc.

City & State

NORTH MIAMI BEACH, FL.

Zip

33179

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

08/05/2004

5. FEI Number

20-1466352

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

LUIS R. SMITH

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

20030 21ST AVENUE

Suite, Apt. #, Etc.

City

NORTH MIAMI BEACH

State

FL

Zip Code

33179

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Date 02/28/2007

REGISTERED AGENT MUST SIGN

**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
PD	LUIS R. SMITH	20030 NE 21ST AVENUE	NORTH MIAMI BEACH, FL 33179
V	SARA SMITH	20030 NE 21ST AVENUE	NORTH MIAMI BEACH, FL. 33179
V	SUSANA KAWEBLUM	20030 NE 21ST AVENUE	NORTH MIAMI BEACH, FL. 33179
V	FRANCISCO PALMERO	20030 NE 21ST AVENUE	NORTH MIAMI BEACH, FL. 33179

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

02/28/2007

Date

305-5424776

Daytime Phone #

FILED

07 MAR 12 AM 10:18

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

900093249079  
03/16/07--01011--003 \*\*300.00

REINSTATEMENT  
CR2E081 (1/07)

06-07

February 28<sup>th</sup>, 2007.

To: Florida Department of State.  
Division of Corporation

Subject: Jessel Telecommunication Corporation.  
# 20-1466352.

Please be advised that we never received our notice of annual report, for the corporation Jessel Telecommunication Corporation in 2006. Enclosed find the fee \$300.00 as discussed with your department for the reinstatement of my corporation for the reinstatement the corporation for the years 2006 and 2007.

Sorry for any inconvenience that this have caused.

Sincerely yours.



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Luis R. Smith  
Jessel Telecommunication  
Corporation