

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000144650

Entity Name: JO CORT, INC

FILED
Mar 12, 2009
Secretary of State

Current Principal Place of Business:

5002 S.W. 137 COURT
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

5002 S.W. 137 COURT
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-1781802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORTES, JOSE CAMILO
5002 S.W. 137 COURT
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

CORTES, LIANYS
5002 S.W. 137 COURT
MIAMI, FL 33175 US

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: LIANYS CORTES

03/12/2009

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:

Title: PD () Delete
Name: CORTES, JOSE CAMILO
Address: 5002 S.W. 137 COURT
City-St-Zip: MIAMI, FL 33175

Title: VD () Delete
Name: CORTES, LIANYS
Address: 104 W 11 ST
City-St-Zip: LEHIGH ACRES, FL 33936

Title: SCRT (X) Delete
Name: LINA, CORTES M
Address: 5002 SW 137 CT
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CORTES, LIANYS
Address: 5002 S.W. 137 COURT
City-St-Zip: MIAMI, FL 33175

Title: VD (X) Change () Addition
Name: CORTES, LINA M
Address: 5002 SW 137 CT
City-St-Zip: MIAMI, FL 33175

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LIANYS CORTES

PD

03/12/2009

Electronic Signature of Signing Officer or Director

Date