

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JAN 24 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000151737

1. Corporation Name

Joseph W. Crews, Inc.

2. Principal Office Address

2545 SE 1st Court

Suite, Apt. #, etc.

City & State

Pompano Beach, FL

Zip
33062

Country
USA

3. Mailing Office Address

2545 SE 1st Court

Suite, Apt. #, etc.

City & State

Pompano Beach, FL

Zip
33062

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/15/2005

5. FEI Number

203786629

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

Leatrice Rubenstein

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

2545 SE 1st Court

Suite, Apt. #, Etc.

City

Pompano Beach

State

FL

Zip Code

33062

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

Leatrice Rubenstein

REGISTERED AGENT MUST SIGN

Date

Jan 16 '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
P	Joseph W. Crews	2545 SE 1st Court	Pompano Beach, FL 33062
S, T	Leatrice Rubenstein	2545 SE 1st Court	Pompano Beach, FL 33062

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: *Leatrice Rubenstein*

Leatrice Rubenstein

01/16/2007

954-941-0548

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

282

Joseph W. Crews, Inc.
2545 SE 1st Court
Pompano Beach, FL 33062
(954) 941-0548

January 16, 2007

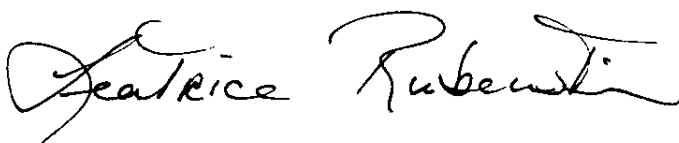
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Joseph W. Crews, Inc.
Document # P05000151737

This letter is to notify you that the above named corporation did not receive the annual report notice that was due by May 1, 2006. We notified the paralegal office that was doing the corporate papers for us of an address change, due to the fact that the corporation moved. The office inadvertently failed to make the appropriate changes for the address, and failed to file the annual report on our behalf. Please accept this as non-receipt of the notification for filing the annual report.

Please accept the enclosed fee of \$150.00 for the annual report fee of \$61.25 and the Corporate Supplemental fee of \$88.75.

Thank you for your cooperation. If you have any questions or concerns, please contact me at the above phone number.



Leatrice Rubenstein
Secretary/Treasurer
Joseph W. Crews, Inc.