2008 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE: *

	REINSTA	_							
DOCUMENT # P06000059458 1. Entity Name JAGEKI ENTERPRISES, INC.			. •			FILE	- 0		
Principal Place of Business Mailing Address				Control	200	18 DEC -5 P	H 2: 17		
1351 SE 7TH AVE., #301 DANIA BCH, FL 33004		1351 SE 7TH AVE., #301 DANIA BCH, FL 33004			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
2. Principal Place of Business - No P O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			11122008	REIN-P	CR2E098	3 (1/07)	
City & State		City & State		4. FEI Numb	00-488	3124		plied For Applicable	
Zip	Country	Zip	Coun	itry	5. Certificate	of Status Desired		. 75 Addi Required	
	6. Name and Address of Current	Registered Agent			7. Name and	d Address of New	Registered Age	nt	
DOWNER	CONTROL V			Name					
ROUSSEAU, NESLY 1351 SE 7TH AVE., #301 DANIA BCH, FL 33004				Street Address ((P.O. Box Numb	er is Not Acceptab	le)		
		0		City			FL	Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed organization of registered spent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
FILE NOWIII FEE IS \$150.00 After January 1, 2009, Fee will be \$300.00						In accordance corporation did	with s. 607.19 I not receive th	3(2)(b), f ie prior n	S., the otice.
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	/CHANGES TO OF	FICERS AND DI	RECTORS	IN 11 z
TITLE	D	☐ Delete	TITU	E				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	ROUSSEAU, NESLY 1351 SE 7TH AVE., #301 DANIA BCH, FL 33004			ET ADDRESS -ST-ZIP	50 12/05	001385 70801020	1006: 004 **	5 150.00	· · · · ·
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STREET ADDRESS CITY-ST-ZIP			1	-ST-ZIP					1,000
12 I hereby	certify that the information supplied with	h this filing does not qualify fo	or the ex	amptions contained	d in Chapter 11	9, Florida Statutes.	I further certify t	hat the in	formation
indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if-changed, or on an attachment with an address, with an other like empowered.									
changed, or on an attachment with any address, with 3fl other like empowered.									