

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000066857

FILED  
Oct 16, 2008  
Secretary of State

Entity Name: JAH ENTERPRISES OF SOUTH FLORIDA, CORP.

**Current Principal Place of Business:**

19351 SW 118TH CT  
HOMESTEAD, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

19351 SW 118TH CT  
HOMESTEAD, FL 33177

**New Mailing Address:**

FEI Number: 35-2333431

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, LAWYER  
19351 SW 118TH CT  
HOMESTEAD, FL 33177 US

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

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: LAWYER BROWN

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: PCEO ( ) Delete  
Name: BROWN, LAWYER  
Address: 19351 SW 118TH CT  
City-St-Zip: HOMESTEAD, FL 33177

Title: V ( ) Delete  
Name: DAVIS-BROWN, ANITA  
Address: 19351 SW 118TH CT  
City-St-Zip: HOMESTEAD, FL 33177

Title: ST ( ) Delete  
Name: BROWN, LAWYER  
Address: 19351 SW 118TH CT  
City-St-Zip: HOMESTEAD, FL 33177

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: ANITA BROWN

V

10/16/2008

Electronic Signature of Signing Officer or Director

Date