

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2023 MAY -4 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FL

0004081 90700
2023 05 -0111- 010 4:00:00

DOCUMENT # P21000100433

1. Corporation Name

J V JR SERVICES INC

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

11789 GRAND BELVEDERE WAY

Suite, Apt. #, etc.

UNIT 101

City & State

FORT MYERS, NY

Zip

33913

Country

USA

3. Mailing Office Address

11789 GRAND BELVEDERE WAY

Suite, Apt. #, etc.

UNIT 101

City & State

FORT MYERS, NY

Zip

33913

Country

USA

CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida

11/29/2021

5. FEI Number

87-3797431

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

JOANN NESS

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

11789 GRAND BELVEDERE WAY

Suite, Apt. #, Etc.

UNIT 101

City

FORT MYERS

State

FL

Zip Code

33913

REINSTATEMENT

2022 - 2023

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

Jness

Date 04/04/2023

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
P	JOANN NESS	11789 GRAND BELVEDERE WAY	FORT MYERS / FL / 33913
P	VICTOR GRIECO JR	11789 GRAND BELVEDERE WAY	FORT MYERS / FL / 33913

MAY - 8 2023

M. WILLIAMS

10. E-mail Address: jness624@gmail.com

(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Jness

JOANN NESS

04/04/2023

908-812-4047

18:04

Notes

05/03/23

*VOL DISS FILED PRIOR TO ADMIN DISS ACCEPT \$300 FOR 2023 REIN -AP

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