

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 992000010348

1. Corporation Name

JORBEL INC.

Principal Place of Business

2955 S.W. 8th Street  
Miami, FL 33135  
Suite 204

Mailing Address

W97-27373

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

300 71st Street, Suite 527

Suite, Apt. #, etc.

City & State

Miami Beach, FL

Zip

33141

Country

Dade

FILED

97 DEC 17 AM 11:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT

4. Date Incorporated or Qualified  
To Do Business in Florida  
December 1992

5. FEI Number

065-0363130

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
President	Janet Exposito	646 N.E. 81st Street	Miami, FL 31338
Secretary	Janet Exposito	646 N.E. 81 Street	Miami, FL 31338

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-12/26/97--01115--010  
\*\*\*\*\*923.75 \*\*\*\*\*923.75

8. Name and Address of Current Registered Agent

Beatriz Rios  
1400 Siena Avenue  
Coral Gables, FL 33146

9. Name and Address of New Registered Agent

Name Janet Exposito

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

646 N.E. 81st Street

Suite, Apt. #, Etc.

City Miami

State FL Zip Code 33138

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date 12-4-97

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information  
on intangible tax.)

12. 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 under section 119.07(3)(i), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

December 4, 1997  
Date

305- 867-0300  
Daytime Phone #

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December 15, 1997

TO: Florida Department of State  
FROM : Carlos S. Ruga

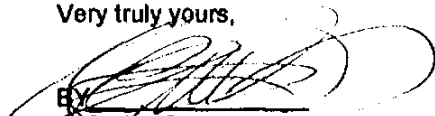
RE: Releasing name of JORBEL INC. - P97-89090  
Ref. Number: ~~P92000040848~~

To Whom May Concern:

Please be advised I am voluntarily releasing the name mention above to wit : Jorbel Inc. to the corporation owned by Mrs. Exposito that was administratively dissolved in order for Mrs. Exposito to reinstate her corporation under the name Jorbel Inc.

If you have any question concerning this matter do not hesitate to call me at (305) 856-6449 Fax (305) 443-6789.

Very truly yours,

  
By: Carlos S. Ruga