

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P93000076331

1. Entity Name  
J & O WHOLESALE & RETAIL ENTERPRISES, INC.



FILED

08 OCT 27 PM 1:36

OFFICE OF STATE  
ATTORNEYS, FLORIDA

Principal Place of Business  
2602 SOUTH DIXIE HWY  
WEST PALM BEACH, FL 33401

Mailing Address  
2602 SOUTH DIXIE HWY  
WEST PALM BEACH, FL 33401

2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country

City & State  
Zip Country



REINSTATEMENT  
10242008 REIN-STATEMENT CR2E098 (1/07) 08

4. FEI Number  
65-0443048

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent  
FERNANDEZ, JOHN  
2602 S DIXIE HWY  
WEST PALM BEACH, FL 33401

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
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]  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE:

FILE NOW!!! FEE IS \$750.00  
After January 1, 2009, Fee will be \$900.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHN FERNANDEZ 2602 DIXIE HWY WEST PALM BCH, FL 33401 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	700137312307 10/27/08-01037-020 **150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE: [Signature]

***West Best Jewelers***

2602 South Dixie Highway  
West Palm Beach, Florida 33401  
Tel: (561) 655-9056 Fax: (561) 655-9059

10/24/08

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

RE: Document's # P93000076331 & P95000017129

Dear Sir or Madam:

I am writing to request a waiver of fee's on both Divisions of Corporations

1) J and O Properties, Inc #P95000017129

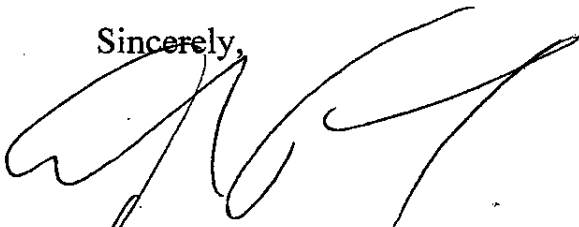
2) J&O Wholesale & Retail Enterprises, Inc. #P93000076331

I never received any notification of renewal on either account.

I have enclosed the \$150.00 renewal fee for each account stated above. I thank you in advance for your understanding and completion of this renewal.

If you have any questions, please feel free to give me a call at (561) 655-9056.

Sincerely,



John Fernandez