| PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. | | | | | | | | |
|---|--|---|--|---------------------------------------|--|--|---|--|
| APPLICATION FOR PORT DEFY MENT STATE and For The STATE physion of corporations | | | | | | | | |
| DOCUMENT # P94000032911 | | | | | 98 DEC 10 PM 3: 49 | | | |
| JENKINS & CHIN SHUE INCORPORATED | | | | | SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | |
| Principal Place of Business Mailing Address | | | | | | | | |
| US If above a | ON FL 33432 Iddresses are incorrect in any way, line thro | SUITE H BOCA RATOI US ough incorrect li | OCA RATON FL 33432 S incorrect Information and enter correction below. | | | | | |
| | ncipal Office Address, If Applicable | New Mailing Office Address, if Applicable | | | Date Incorp To Do Busir | orated or Qualified ness in Florida | 04/28/1994 | |
| Suite, Apt. | | Suite, Apt. #, etc. City & State | | | 5. FEI Number Applied F | | Applied For | |
| Zip | Country | Zip Country | | - | 6. \$8.75 Additional Fee require | | Not Applicable \$8.75 Additional Fee required | |
| 7. Names a | and Street Addresses of Each Officer and/o | or Director (Fic | orida nonprofit corpora | itions must list at lea | L | E OF OTATOO BEGINED | for a Certificate of Status | |
| Title(s) | Name of Officers and/or Directors 2 | eet Address of Each icer and/or Director Post Office Box Nu | umbers)_ | City / | State / Zip | | | |
| D | JENKINS, DAVID W 8134-C THAME | | | BLVD | BOCA RATON FL | | | |
| D | CHINSHUE, PATRICK N. 6236 COU | | | FAIR CIRCLE BOYNTON BEACH FL | | | | |
| | | | | | 10 | 0000271: -12/15/98 | 25615 -01033-822 | |
| | | | | | | ****150.0 | 0 ****150.00 | |
| / | B. 12/11/98 AR | | | | | | | |
| 2 | | - | | , , , , , , , , , , , , , , , , , , , | | | | |
| 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name | | | | | | | | |
| JENKINS, DAVID W. Street Address (P.O. Bo | | | | | | is Not Acceptable) | (86/6) OPC | |
| 33 SE 7TH STREET, SUITE H BOCA RATON FL 33432 Suite, Apt. #, Etc. | | | | | O. Box Number is Not Acceptable) | | | |
| City | | | | | | State Zip Code | | |
| 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 11.30.98 | | | | | | | | |
| 11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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: 11-30 · 98 (561) 361 - 073 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone # | | | | | | | | |

◆ JENKINS & CHIN SHUE

INCORPORATED
Renderings & Illustrations
33 S.E. Seventh St., Suite H Boca Raton, FL 33432
1.561.361.0731 Fax 1.561.361.9676

Florida Department of State Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee Fl 32314-6327

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To whom it may concern,

This correspondence is regarding document # P94000032911, an Application for Reinstatement for the corporation of Jenkins & Chin Shue Inc, and document # P97000097715, an Application for Reinstatement for the corporation of Plan It Inc., both of which are addressed at 33 S.E. 7th. Street, Boca Raton Fl 33432.

Earlier this month we received a Notice of Administrative Dissolution or Revocation packet for both companies. We are requesting to have both corporations returned to "active" status, for the original filing fee of \$150.00 for each corporation. Our accountant advised us that we were to receive two notices regarding the annual reports. We did not receive either one.

Please accept our request for reinstatement, and two checks for \$150.00 each. Please contact me at (561) 361-0731, if needed. Thank you for your attention in this matter.

Sincerely Yours,

David W. Jenkins

Patrick Chin Shue