

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 # **P94000039143**

1. Corporation Name

JEMMCO ENTERPRISES, INC.

Principal Place of Business

**16391 STONEHAVEN ROAD
MIAMI LAKES FL 33014**

Mailing Address

**16391 STONEHAVEN ROAD
MIAMI LAKES FL 33014**

FILED

97 DEC 30 AM 8:44

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



REINSTATEMENT

97/00

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

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05/20/1994	
City & State		City & State		5. FEI Number	
Zip		Zip		65-0537914	
Country		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>				\$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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	FORD, EUGENE JR	16391 STONEHAVEN RD.	MIAMI LAKES FL 33014
D	HOLLOWAY, MARVIN	1915 BRICKELL AVE C-801	MIAMI FL

000002391230--6
-01/06/98--01070--020
****758.75 ****758.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**FORD, EUGENE JR
16391 STONEHAVEN RD
MIAMI LAKES FL 33014**

Name

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

Suite, Apt. #, Etc.

City

State
FL

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

Eugene Ford Jr
REGISTERED AGENT MUST SIGN

Date **December 29, 1997**

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:

Eugene Ford Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-29-97
Date

(305) 822-6222
Daytime Phone #

CP2ED040 (8/97)