

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT -9 AM 9:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900008602559
10/25/02--01121--023 **150.00

01-02 UBR

DOCUMENT # P94000051660

1. Corporation Name

J.F. GLUS & ASSOCIATES, INC.

2. Principal Office Address

86743 OLD HWY

Suite, Apt. #, etc.

BOX 8

City & State

ISLAMORADA, FL.

Zip

33036

Country

USA

3. Mailing Office Address

86743 OLD HWY.

Suite, Apt. #, etc.

BOX

City & State

ISLAMORADA, FL.

Zip

33036

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/08/1994

5. FEI Number

650501795

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

JAMES F. GLUS

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

86743 OLD HIGHWAY

Suite, Apt. #, Etc.

8

City

ISLAMORADA

State

FL

Zip Code

33036

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 10/4/2002

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
Pres.	JAMES F GLUS	86743 OLD HWY #8	ISLAMORADA, FL 33036

10. 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]

JAMES F. GLUS.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/4/2002 805-852-2082

Date

Daytime Phone #

CR2E081 (9/01)

Siegelauab Lieberman & Associates P.A.

Certified Public Accountants

9690 W. Sample Road

Suite 202

Coral Springs, FL 33065

(954) 753-2222

Fax (954) 753-1123

August 26, 2002,

Florida Division of Corporations

Tallahassee, FL.

RE: James F. Glus & Associates
DOC # - P94000051660
FEI # - 65-0501775
12/31/01 and 12/31/00 Annual Reports

Dear Sirs:

Enclosed please find two checks for \$150.00 each for the annual filing fees for 12/31/2001 and 12/31/2000. We are requesting that you please abate the late filing penalties. Unfortunately, my client has moved several times in 2001 and several important documents failed to reach him. As you can see from the information currently listed with the state the information was sent to the Registered Agent's address as opposed to the Principal Address, where it would have been forwarded to his current address and consequently paid timely.

The Company's current address is:

~~140 Inglewood Dr.~~
~~Islamorada, FL 33036~~

86743 Old Hwy Box
Islamorada, FL 33036

305-517-4365

Thank you for your cooperation.

Respectfully


Kenneth Lieberman

FROM: JAMES F. GLUS.
PRESIDENT

I HAVE NO IDEA WHY THE DIVISION OF CORPORATIONS DID NOT CHANGE my mailing address along with the Principal Address on 4/8/99. THIS RESULTED IN THE CORPORATE FILING PAPERS NOT BEING SENT TO me. WE FOUND THIS OUT JUST A SHORT TIME AGO WHEN I ASKED MY CPA IF HE HAD TAKEN CARE OF THEM.