

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 APR 23 PM 3:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 094000090201

1. Corporation Name

JOEYERS WILD AMUSEMENTS, INC

2. Principal Office Address

6101-90TH AVENUE NO.

Suite, Apt. #, etc.

City & State

PINELLAS PARK, FL

Zip 33782

Country

PINELLAS

3. Mailing Office Address

6101-90TH AVENUE NO.

Suite, Apt. #, etc.

City & State

Zip 33782

Country

PINELLAS

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

59-3318065

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

SP

7. Name and Address of Current Registered Agent

Name

JOSEPH CASA

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

6101-90TH AVENUE NORTH

Suite, Apt. #, Etc.

500004192265-4

05/10/2011-01/01/12

\*\*\*\*308.75 \*\*\*\*308.75

City

PINELLAS PARK

State

FL

Zip Code

33782

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

JOSEPH CASA

Date

4/19/11

REGISTERED AGENT MUST SIGN

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
DPS	JOSEPH CASA	6101-90TH AVENUE NO.	PINELLAS PARK, FL 33782

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/11 727-541-7356

CR2E081 (9/00)

# **Jokers Wild Amusements, Inc.**

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**"SERVICE SUPPORT DURING YOUR OPERATING HOURS"**

**OFFICE:** (813) 541-7356

**SERVICE:** (813) 825-4738 (Digital Pager)

**FAX:** (813) 541-4696

**To:** Tyrone Scott  
Divisions of Corporations

**From:** Joseph Casa   
Jokers Wild Amusements, Inc.

**Date:** February 27, 2001

**Re:** Corporation Annual Report

This serves to confirm our conversation of February 27, 2001 in which we discussed the following:

I indicated that on **January 19, 2001**, I sent an inquire to the State of Florida Division of Corporations requesting an answer as to why the corporation was listed as inactive. I enclosed a copy of the check made payable to the Department of State sent on **January 25, 2000** for the filing fee. At your request I am again sending to you that same package.

You requested that I remit additional funds to have the corporation made active and additional funds to obtain a certificate of status. I am enclosing these funds.

I am requesting any and all late fees be waived as the original return was sent timely.

I have enclosed an overnight mailer for you to return the Certificate of Status to me. In addition, if at all possible, could you please fax to me a copy of the certificate of status at 727-384-4606 as soon as it is completed.

Your assistance in this matter is greatly appreciated.

# **Jokers Wild Amusements, Inc.**

**"SERVICE SUPPORT DURING YOUR OPERATING HOURS"**

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**SERVICE: (813) 825-4738 (Digital Pager)**

**FAX: (813) 541-4696**

**To:** Division of Corporations  
Florida Department of State

**From:** Joseph Casa  
Jokers Wild Amusements, Inc.

**Date:** January 19, 2001

**Re:** Corporation Annual Report

This serves to confirm my conversation of January 19, 2001 with a representative of your office as follows:

I indicated that I was informed that the above named corporation was stated as "inactive" in your records. I have enclosed for your reference a copy of the check that was sent on January 25, 2000 along with the report. I was told a trace on the deposit and report would have to be done.

I was told that it would take three to four weeks to obtain an answer in this matter. Please notify me as soon as possible at the enclosed address as to your findings.