

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

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

FILED

99 OCT 22 AM 9: 18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000003437

1 Corporation Name

JAE SHANKAR, INC.

Principal Place of Business

27615 SR 54 WEST  
WESLEY CHAPLE FL 33543

Mailing Address

27615 SR 54 WEST  
WESLEY CHAPLE FL 33543

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

2 New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

01/13/1995

5. FEI Number

59-3337448

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$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	4 City / State / Zip
PD	PATEL, JAYANTILAL C	<del>18210 N. 301 HWY</del> 27615 SR 54 WEST	<del>DADE CITY FL 33525</del> 33543 WESLEY CHAPLE FL
VD	KHUSHAL, ALPESH N	2801 MCCOY ROAD	ORLANDO FL 32809
SD	PATEL, BHAVESH R	2801 MCCOY ROAD	ORLANDO FL 32809
TD	PATEL, JAGDISHKUMAR C	4170 BLAD EAGLE LANE	JACKSONVILLE FL 32257

8. Name and Address of Current Registered Agent

DAYTON, WILLIAM G ESQ.

14140 7TH STREET -

DADE CITY FL 33525

14247 7TH ST

9. Name and Address of New Registered Agent

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

*William G Dayton*  
REGISTERED AGENT MUST SIGN

Date OCT. 18, 1999

11. 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 OF OFFICER OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/18/99

Date

Daytime Phone #

William G. Dayton

Attorney at Law  
Touchton Building

14149 7th Street • Dade City, Florida 33525

Phone: (352) 567-9223  
Fax: (352) 567-6823

Post Office Box 1883  
Dade City, FL 33526

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October 18, 1999


Florida Department of State  
Division of Corporations  
Tallahassee, Florida

Dear Sirs:

Pursuant to a telephone conversation with your office today, I enclose the reinstatement form for Jae Shankar, Inc. I understand that you received the annual fee but did not receive the corrected information concerning the address of the President and Registered Agent. That information is reflected on the enclosed forms.

Thanking you for your attention in this matter, I remain

Sincerely,

  
William G. Dayton, Esquire  
Florida Bar #33527

WGD/nf  
enclosure