PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMED

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CO REII	PORATION A SEASON	Katheri Secreta	RTMENT OF STATE ne Harris ry of State corporations	02 APR 30 AM II: 36 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # P950000 \9533 1. Corporation Name				
JANSEN CORP.			3000055093139	
	al Office Address ALHAMBRA CIRCLE	3. Mailing Office Addre		-05/14/0201053012 ****758.75 ****758.75
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		
SUITE	350	SUITE 350		4. Date Incorporated or Qualified To Do Business in Florida 03/08/95
City & State		City & State		5. FEI Number Applied For
CORAL GABLES, FL		CORAL GABLES, FL		650633734 Not Applicable
zip 3313 ¹	4 Country	^{Zip} 33134	Country U.S.A.	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
	7. Name and Address of Current Registered Agent			
	Name JOSE A. SANTOS, JR.			
_	Street Address (P.O. Box Number is Not Acceptable) 220 ALHAMBRA CIRCLE			
4	Suite, Apt. #, Etc.			
	CORAL GABLE	S	State Zip Code FL 33134	
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 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
D	MARIA C. CAMPO	· ·	ALHAMBRA CIR E 350	CLE CORAL GABLES, FL 33134
			` · · · · ·	1259
				1613/1
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 integrand accurate, and my signature shall have the same legal effect as if made under oath.				
SIGNATURE: attantey-in-fact for Maria C. Campo 4/22/02 (305)446-4000 SIGNATURE: Date Daytime Phone #				

Daytime Phone #



220 Alhambra Circle Suite 350 Coral Gables, Florida 33134

Telephone: 305.446.4000 Facsimile: 305.446.7764

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Also licensed in the District of Columbia

April 22, 2002

<u>Via FedEx</u>
Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Dear Division of Corporations:

Enclosed please find the completed Corporation Reinstatement for our firm's client, Jansen Corp.

I telephoned a representative from your office in order to inquire why our client showed an "inactive" status on www.sunbiz.org. I was informed that the \$150 annual UBR fees had not been paid since 1997 and, as a result, the corporation was dissolved.

However, our client never received any UBR statements since 1997. Moreover, a representative from your office discovered that your database further revealed that the UBRs were returned back to your office, which further evidences our client's non-receipt of previous UBRs. As such, I was informed that the \$600.00 reinstatement fee would be waived if requested in writing. Accordingly, the purpose of this correspondence is to confirm my request that the \$600 reinstatement fee be properly waived due to non-receipt of previous UBRs.

However, although the reinstatement fee is waived, our client nonetheless understands that it must pay the Department of State a \$150.00 UBR annual fee for each year that was not previously paid. I was informed that years 1998, 1999, 2000, 2001, and 2002 have not been paid. As such, payment in the amount of \$750.00 has been made ($$150.00 \times 5$ years = 750.00).

In addition, please notice that, on the reinstatement form, a request was made for a certificate of status for a fee of \$8.75. Accordingly, a payment in the amount of \$8.75 has been made.

Attached please find a check in the amount of \$758.75 which represents the \$750.00 for UBR fees for the past 5 years, and the \$8.75 fee for the certificate of status.

Please feel free to contact me should your office have any questions or comments. Your time and attention to this matter is greatly appreciated.