∮ / ♣ PLEASE READ /	ALL INSTRUCTIONS	REFORE COMPLE	TING THIS FORM.	117
APPLICATION	FLORY DIPARTIN	A TATE		110
NS	S A tary of S		Fre H Com H	
DOCUMENT # 795 000042 042			97 JUN - 6 AM 7: 55	
1. Corporation Name JEE Group, Inc.			SECRE VARY OF STATE TALL AHASSEE FLORIDA	
			TALLAHASSEE FLOI	(IUA
Principal Place of Business 7441 N.W. 784 Street	Mailing Address Same	•		
Medley iFlorida 33				
If above addresses are incorrect in any way, line thro		correction below.		$a\!\omega$
2. New Principal Office Address, If Applicable 1441 N.W. 184 Street Suite, Apt. #, etc. 3. New Mailing Office Address, If Applicable 1441 N.W. 184 Street Suite, Apt. #, etc.		Applicable 4. Date Inc. To Do B	orporated or Qualified usiness in Florida May 30	1995
City & State	Cay & State	5. FEI Nun		Applied For Not Applicable
Medley Florida	Medley Flood	6	\$8.75 Ac	dditional Fee required
7. Names and Street Addresses of Each Officer and/o	or Director (Florida nonprofit corpora	tions must list at least 3 directors)		
Title(s) and/or Directors	[Off	icer and/or Director se Post Office Box Numbers)	City / State / 2	Zip
Pres Elia Frewa 1278 Ginger Circle				
Ft. Landerdale, Fl				
			seossooos 11079/11/30-	12-4 106-002
			****365,00	*****365 <u>.00</u>
Name and Address of Current R	egistered Agent	9. Name an	d Address of New Registered Agent	
None			Noval	CR2EQ40 (12%6)
Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.				
		Sty / 1 N.	State Zip	
10. I, being appointed the registered agent of the abov	e named corporation, em familiar wit			380214
Registered Agent Agent REC	SISTERED AGENIT MUST STON		Date 5/28/9'	7
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No				
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 filling this reinstalement 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 lighted 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 UN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED UN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: SIGNATURE AND TYPED UN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				

J & E GROUP, INC

May 14, 1997

Division of Corporations Annual Report/ Reinstatement Section P.O Box 6327 Tallahassee, Fl 32314

Dear Sir or Madam:

Enclosed are our 1996 and 1997 fees of \$ 365.00. As stated to your representative this day, the Annual report was mailed to our attorney at 201 Alhambra Circle suite #502 Coral Gables, Florida 33134. Our Attorney denied receiving the form, consequently we were not aware of the filing requirement. Our Accountant, PATRICK MOYAL, mentioned to us that the annual fee was due and not paid according to our records. We respectfully request that any penalty be waived on the basis that we are new in this country, since 1995, and we paid professional for filing the proper forms, on time. We now know and we will make sure that this never happen again.

Sincerelly,

Elia Newa

President