

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1002

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 APR -8 PM 2:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000026747

1. Corporation Name

BTJ, INC. ~~DBA~~

THE Salon of DelRAY

2. Principal Office Address

15200-Jog Road

Suite, Apt. #, etc.

Suite A

City & State

Delray Beach

Zip

33446

Country

USA

3. Mailing Office Address

15200-Jog Road

Suite, Apt. #, etc.

Suite A

City & State

Delray Beach

Zip

33446

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0654406

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

Gerard C. Guerriero

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

~~23084 Sunfield Dr.~~ 23324 BOCA CHICA CIRCLE

Suite, Apt. #, Etc.

City

Boca Raton

State

FL

Zip Code

33433

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

Date

4-1-02

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
P	Joseph Miglore	6568-Patio Lane	Boca Raton, FL 33433
S	Gerard Guerriero	23084 Sunfield Dr. 23324 BOCA CHICA CIRCLE	Boca Raton, FL 33433

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 TYPE

PRINTED NAME

OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

GERARD C. GUERRIERO

4-1-02

561-496-6737

CR2E081 (9/00)

Attachment Document

2092

P96000026747

M A S
3000 N UNIVERSITY DRIVE
SUITE E
CORAL SPRNGS, FL 33065
Tel # 954-346-7288
Fax # 954-346-7217

February 9, 2002

Uniform Business Report Filing
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: UBR/P96000026747/BTJ, INC.

To Whom It May Concern:

This is to request acceptance of the enclosed corporation reinstatement. The client did not receive the UBR form. It is the client's responsibility to file the corporate annual report. We do not file the corporate annual report for our clients unless is given to us for filing.

Enclosed find check for \$300.00 (2001/150.00 & 150.00/2002 for the filing fee.

Should you have any questions, please do not hesitate to call the office.

Thank you, for your assistance in this matter.

Sincerely,


Lissette A Mawby
btj