

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
98 MAY -1 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000037759

1. Corporation Name

JFK Properties, Inc.

Principal Place of Business

c/o Oweisi  
15587 N.W. 11th Ct.  
Pembroke Pines, FL 33028

Mailing Address

Same as principal office

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

4/29/96

5. FEI Number

65-0695871

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P/S	Jamal Oweisi	15587 N.W. 11th Ct.	Pembroke Pines, FL 33028
D/V	Khaled Al-Uoisi	302 S.W. 85th Way	Pembroke Pines, FL 33025
			800002516558-- -05/08/98--01011--017 ****300.00 ****300.00

REINSTATEMENT

97-98

5-6-98

8. Name and Address of Current Registered Agent

Jamal Oweisi  
15587 N.W. 11th Ct.  
Pembroke Pines, FL 33028

9. Name and Address of New Registered Agent

Name

Leonard Oshinsky

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

1150 E. Hallandale Beach Blvd.,

Suite, Apt. #, Etc.

Suite A

City

Hallandale

State  
FL

Zip Code  
33009

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

*Leonard Oshinsky*  
REGISTERED AGENT MUST SIGN

Date 4/27/98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☐

No ☒

(See other side for information  
on intangible tax.)

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 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

JAMAL OWEISI

04-28-98 (1954) 9413406

Date

Daytime Phone #

CR2E-040 (1/98)