## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATION STATEMENT		S	ecretar	TMENT OF STAT y of State onporations			LED PM 1:09			
DOCUMENT # P96000054713  1. Corporation Name					. •		CRETAR LAHASS	Y OF STATE EE, FLORIDA			
J &H EXI	PORT ENTER	PRISES, INC	•					у шолирд	,		
205 HAR	RISON AVE.										
2. Principal	Office Address		3. Mailing Office Address 205 HARRISON AVE.			向尼原	DEMOTATEMENTOZ - 04				
Suite, Apt. #,	etc.		Suite, Apt. #, etc.			4. Date in	4. Date Incorporated or Qualified To Do Business in Florida NOV 5, 2001				
City & State			City & State BELLEAIR BEACH			5. FEI Nu	5. FEI Number         Applied For           59-3402940         Not Applicable				
Zip	Zip Country		Zip 33786		Country USA	6. CERTIFIC				e required	
			7. N	ame and A	Address of Current Re	gistered Agent				,	
	Name JOHN KOUTOUZIS										
	Street Address (P.O. Box Number is Not Acceptable) 205 HARRISON AVE.										
	Suite, Apt. #, Etc.										
	BELLEAIR BEACH						State FL	Zip Code 33786			
8. I, being a Signature of Registered A	1.1	red agent of the abo	we named corpo	<u>,                                     </u>	familiar with and accept	the obligations of s	ection 607.05	05 or 617.0503, F.S.	2-0	CRZEOB1 (01/04)	
9. Names a	and Street Addresses	s of Each Officer an	d/or Director (Flo	rida nonpre	ofit corporations must lis	t at least 3 director	s)				
Titles	Titles Name of Officers and/or Directors			Street Address of Ea Officer and/or Direc			City / State / Zip				
SEC.	HARRIET KOUTOUZIS			205 HARRISON AVE			BELL	BELLEAIR BEACH, FL. 33786			
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<u> </u>	<del></del>				·····	4	4 454 453	to the form being the or			
						11,	<u> </u>	-des-sh	<del>1</del> ₹₹458.	75	
this reins owed by on this a	statement application the corporation have application is true and	n, the reason for disa e been paid and the	solution has been names of individ	eliminated	to execute this application, the corporate name so on this form do not qual ne legal effect as if made	atisfies the requirem ify for an exemption	ents of section under section	n 607.0401 or 617.040	I, F.S., that al information in	I fees dicated	
this reins owed by	statement application the corporation have application is true and	n, the reason for disa e been paid and the	solution has beer names of individ signature shall ha	eliminated uals listed ive the san	f, the corporate name so on this form do not qual ne legal effect as if made	atisfies the requirem ify for an exemption a under oath.	ents of section under section	n 607.0401 or 617.040 n 119.07(3)(i), F.S. The	I, F.S., that al information in	l fe dic	



## John & Harriet Koutouzis

205 Harrison Ave. Belleair Beach, FI 33786, U.S.A.

Nov. 17, 2004

To bept, of Corporation Reinstationest

I would like to reinstate my

corporation name. When I went to

apply for a ficticious name, I

was told the name had seen

was told that not receive any

dissolved. I did not receive any

dissolved back in 2002,

dissolved back in 2002,

Enclosed is the application for

reinslatement and a chick for

reinslatement and a chick for

seinslatement and a chick for

status.

Shank you, John Kontonzia