

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 182

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JAN -5 AM 8:00

DOCUMENT # P96000079687

1. Corporation Name

J & N EXPORT, INC.

Principal Place of Business

112 HOLLIDAY DRIVE
HALLANDALE FL 33009

Mailing Address

112 HOLLIDAY DRIVE
HALLANDALE FL 33009

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

09/25/1996

5. FEI Number

65-0706288

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 3	City / State / Zip 4
PTD	OBERTI, DANIEL	112 HOLLIDAY DRIVE	HALLANDALE FL 33009
VSD	OBERTI, NOMIE	112 HOLLIDAY DRIVE	HALLANDALE FL 33009

800026626848
01/09/04--01078--019 **450.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

OBERTI, DANIEL
112 HOLLIDAY DRIVE
HALLANDALE FL 33009

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

12.19.03

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(954) 455-0907
12.19.03

CR2E040 (8/02)

J & N EXPORT, INC.
112 HOLLIDAY DRIVE
HALLANDALE, FL. 33009

January 5, 2004

Florida Department of State
Attn: Ruby Dunlap

Dear Madam:

As per our conversation earlier today, we have not received the annual report nor the UBR for 2002 or 2003.

Please let me know if I can be of any further assistance. Thank you for your help.

Sincerely,



Daniel Oberti
J & N Export
FEI # 65-0706288
Ref # P96000079687