

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 JUN 23 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000093548

1. Corporation Name

JESPER RENOVATIONS CORP
3640 E. 4 AVE., #202
HIALEAH, FL. 33013

2. Principal Office Address

3640 E. 4 AVE.

Suite, Apt. #, etc.

202

City & State

HIALEAH, FL.

Zip

33013

Country

US

3. Mailing Office Address

312A SW 12 AVE

Suite, Apt. #, etc.

City & State

MIAMI, FL.

Zip

33130

Country

US

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/14/96

5. FEI Number

65-0743892

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRE

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JESUS M. FERNANDEZ

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

3640 E. 4 AVE., #202

Suite, Apt. #, Etc.

City

HIALEAH, FL. 33013

State

FL

Zip Code

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

[Signature]

Date

REGISTERED AGENT MUST SIGN

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
PTSD	JESUS FERNANDEZ	3640 E. 4 AVE. #202 HIALEAH, FL. 33013	

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 contained in Chapter 119, 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

June 21, 2006

To Whom It May Concern:

**Attach is the corporation reinstatement for my corporation
JESPER RENOVATIONS CORP.**

**On December, 2003 I had to close the business office and on
April, 2004 I had to leave the US and go back to Spain. At that
time in December, 2003 I had left a forwarding address but the
location of the mailing address went out of business (not being
the US post office) and I did not receive any mailings.**

**Early this year (2006) I recently returned to the US and have a
need to utilize my corporation when I was told that it had been
closed for lack of annual payment. I am enclosing a payment for
the years 2004, 2005 and 2006 totaling \$450.00. As I had not
received the annual notice I ask that the penalty be waived and
that the corporation be reinstated as soon as possible so that I
may begin to do work once again.**

**Please address any correspondence to the mailing address
shown on the reinstatement form. Thank you for your attention,
assistance and understanding.**

Sincerely,



Jesus Fernandez, Pres.