PLEASE READ	ALL INSTRUCTION	ONS BEFORE	CAMPLETING THIS FORM.	
APPLICATION FOR	FLORI A 5 PAR Katheri		FILED	
REINSTATEMENT	ecretai Div sion of c		99 JUN 21 MI 9: 23	
DOCUMENT # P96 000094810			DALLANACSEE, FLORIDA	
J.C. FUNDING ASSOCIATES, Inc.			BALLARACSEE, FLORIDA	
	•			
Principal Place of Business Mailing Address  23 00 (1) 5 Amol (7 R1 #300)				
2300 W. SAMPLE RI #300 POMPANO BOL, FL. 33073				<b>₽</b>
If above addresses are incorrect in any way, line thro		d enter correction below.	REINSTATEMENT 97	990
New Principal Office Address, If Applicable	New Mailing Office Address, If Applicable		Date Incorporated or Qualified     To Do Business in Florida	
Suite, Apt. #, etc.	Suite, Apt. #, etc.  City & State		5. FEI Number Applie	ed For
City & State Zip Country	Zip	Country	S8.75 Additional Fe	
7. Names and Street Addresses of Each Officer and/	or Director (Florida nonprofit	corporations must list at le	CERTIFICATE OF STATUS DESIRED L for a Certificate of east 3 directors)	Status
Tritle(s)  Name of Officers and/or Directors		Street Address of Eac Officer and/or Directo NOT Use Post Office Box	ch or City / State / Zip	
2300 W. SAMPLUM			6 U #300 0	
PRUS JOSEB CHAN	CKON 1		Company Bch, F	· <u>(, 33</u> 07)
			900002915649-	-5
			-06/25/9901060010 ***1058.00 ***1050	
			Name and Address of New Registered Agent	
Street Address (P.O. Box Number is Not Acceptable)  Suite. Agt. #. Etc.				
Suite, Apt. #, Etc.			W. SAMPLEN #300	CRZEO
		# 30 City D	State Zip Code	
10. I, being appointed the registered agent of the above	ve named corporation, am fai	miliar with and accept the o	And BcL FL 3307 obligations of Section 607,0505, F.S	3
Signature of Registered Agent Agent REGISTERED AGENT MUST SIGN			Date 6-17-99	
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes D No M (See other side for information on intangible tax.)				
this reinstatement application, the reason for disso	flution has been eliminated, th iames of individuals listed on	he corporate name satisfies i this form do not qualify for	r an exemption under section 119.07(3)(i). F.S. The information i	fees
SIGNATURE: SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  JOSE C. HARRON  JOSE C. HARRON  Date 17 199 978-7620  Daytone Phone 1				