

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

00 JUN -2 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000097159

1. Corporation Name

Jordan International Enterprises of Ocala, Inc.

W-13056

Principal Place of Business

Mailing Address

7600 NW 120th Street
Reddick, FL 32686

same

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT

97-00

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

12/2/96

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

☒ Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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/T/S	Ilka Barria	7600 NW 120th Street	Reddick, FL 32686
D	Riviela Tejeira	7600 NW 120th Street	Reddick, FL 32686
D	Minerva Portillo	7600 NW 120th Street	Reddick, FL 32686
D	Verna Johnson	7600 NW 120th Street	Reddick, FL 32686
<div>000003312870--3</div> <div>-07/05/00--01058--023</div> <div>*****11.25 *****11.25</div>			
<div>000003312870--3</div> <div>-07/05/00--01058--021</div> <div>*****266.25 *****266.25</div>			

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

Fred Brei

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

7600 NW 120th Street

Suite, Apt. #, Etc.

000003312870--3

City

Reddick

-07/05/00--01058--022

*****922.50 *****922.50

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

[Signature]

REGISTERED AGENT MUST SIGN

X Date 5-4-00

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

Ilka M. Barria Z.

5-4-00

Date

Daytime Phone #

CR20040 (1/98)