

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 JAN 29 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P970000000184

1. Corporation Name

Just TRAVEL Inc.

2. Principal Office Address

1868 North University Dr.

Suite, Apt. #, etc.

Suite 101

City & State

Plantation Fl.

Zip

33322

Country

Broward

3. Mailing Office Address

1868 North University Dr.

Suite, Apt. #, etc.

Suite 101

City & State

Plantation Fl.

Zip

33322

Country

Broward

4. Date Incorporated or Qualified
To Do Business in Florida

1-1-97

5. FEI Number

65-071-4944

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Jacque Shaifer

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

1868 N. University Dr.

Suite, Apt. #, Etc.

Suite # 101

City

Plantation Fl.

100003746331-1

02/21/01 01117-010

****500.00 ****500.00

State

FL

Zip Code

33322

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

Jacque Shaifer (President)

REGISTERED AGENT MUST SIGN

Date 1/24/01

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

President Jacque Shaifer

661 NW 133 way

Plantation Fl. 33325

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 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:

Jacque Shaifer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/01 (954)-236-8383
Date Daytime Phone #

CR2081 (9/00)

From: JUST TRAVEL, INC.
1868 North University Drive
Suite #101
Plantation, FL. 33322

Attention: Kathy Ashton

As per our conversation, please understand the lateness in paying yearly fee was due to the following;

The company moved from a different location and never received the notices - In speaking with KRISTEN ECKEL at your office, she did acknowledge "return of notices" to you from the post office. Since no notices were received by me, I was completely unaware of any monies due.

Enclosed find company check for \$1,200.00 which would make me current and includes all late penalty charges.

Please re-instate as soon as possible and I thank you in advance.

Jacqueline
President - JUST TRAVEL INC.