

98-00 WBR

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS,

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 DEC 22 PM 2:47

Read Instructions on Other Side Before Making Entries
Make Check Payable To: Department of State

J & J Quality Plastering +
Drywall Inc.

1925 Brickell Ave. D205
Miami FL 33129 W

W-28641

Address

Address

City and State

Zip Code

4. FEI Number 593214486

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Names of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
PD	JEROME BERTHONNE	1925 BRICKELL AVE D205	MIAMI FL 33129

000003524570--3
-01/05/01--01024--017
米米米米450.00 米米米米450.00

Ph 11/27

This corporation has liability for intangible tax under section 199.032, Florida Statutes. ☐ Yes ☐ No
For intangible tax information call Department of Revenue 904-488-6800.

-REGISTERED AGENT INFORMATION

7. Name and Address of New Registered Agent

6. Name and Address of Current Registered Agent

Jerome Berthoune
1925 Brickell Ave D205
Miami FL 33129

Name _____

Street Address (Do NOT Use P.O. Box Number)

Street Address (Do NOT Use P.O. Box Number)

City and 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, F.S.

Signature of
Registered Agent

~~X~~ George Beethorn REGISTER

REGISTERED AGENT MUST SIGN

Date _____

11/2, 100

9. 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., and that all fees owed by the corporation have been paid. 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 of _____
Officer or Director

for James Barthorne

Date 11/24-00

Phone #

$$305940 = 9664$$

Typed or printed name of signing officer or director

Jerome Berthonne

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee
required for a
Certificate of Status

2

Certified Mail-Return Receipt Requested

November 9, 2000

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Reference: Missing annual report Corporation #:

Gentlemen:

Enclosed is the application for reinstatement along with a check for \$308.75 which includes the \$300 fee plus a certificate of good standing for \$8.75.

We would like to state that the original application that was mailed at the beginning of 1997 and thereafter was never received by us because we moved from the original address 343 Almeria Avenue, Coral Gables, Florida and even though we left a forwarding address it was never sent to us at our new business address Miami, Florida 1925 Brickell Ave., Suite D205, Miami FL 33129, not it was never returned to you.

Our business is small and charging us a reinstatement fee of \$600.00 would be a burden to us. Therefore we request that you abate the reinstatement fee and accept the above check to reinstate us in good standing. We formed the corporation on February 14, 1996 and unfortunately we don't remember our legal advisor telling us that we would have to pay an annual fee to keep the corporation active. Now we know and can assure you that this incident will not happen in the future and will inquire if we don't receive an annual renewal form at the begging of each year.

If you need more information please call me at (305) 854-4422.

Sincerely yours,


JEROME BERTHONNE
President