

APPLICATION FOR REINSTATEMENT  FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 OCT 25 PM 4:01

1. Corporation Name

BEAUTIFUL JADE, INC.

Principal Place of Business

Mailing Address

2200 W GLADES RD
STE 608
BOCA RATON FL 33431
UIS

~~2144 NW 4TH COURT~~
BOCA RATON FL 33431

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

2 New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business In Florida

03/18/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0754555

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)

[illegible]

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GOLDMAN, DAVID E
20700 WEST DIXIE HIGHWAY
SUITE 100
NORTH MIAMI BEACH FL 33180

Name _____

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date _____

11. 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

Date _____

Daytime Phone #

2144 NE 4th Court
Boca Raton, Florida
October 20, 1999

Dear Sus:

This letter is in reference to a phone conversation I had today with Mr. Tyrone Scott. I told him I had received the notice of dissolution for my Corporation yesterday and had received no other mailings. The address on the mailing is incorrect and I have been residing at the

2144 NE 4th Court since 1996. Enclosed is the amount he told me to send. Please correct my address.

Thank you.

Eileen Larkin