PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION FOR** Secretary of State P97000043596 DOCUMENT # 1. Corporation Name J & J CAPITAL, INC. Principal Place of Business Mailing Address 10451 SOUTHERN BOULEVARD 10451 SOUTHERN BOULEVARD ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411 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 Date Incorporated or Qualified To Do Business in Florida 05/16/1997 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 65-0760875 Not Applicable Country Country 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) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors City / State / Zip JAMIL, JANICE A 10451 SOUTHERN BOULEVARD **ROYAL PALM BEACH FL 33411** ST JAMIL, TIM S 10451 SOUTHERN BOULEVARD **ROYAL PALM BEACH FL 33411** 600002902836--6 -06/14/99--01006--006 ****300.00 ****300.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent JAMIL, JANICE A Street Address (P.O. Box Number is Not Acceptable) 10451 SOUTHERN BOULEVARD **ROYAL PALM BEACH FL 33411** Suite, Apt. #, Etc. City State 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 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. No Yes L 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 ir formation indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE;

NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Dear Sir/Madaar 2

The Have not received our filing form for our corporation—

The Copital, Inc. for 1978 + 1999.

Clease reinslate us at our original fee of \$150° Taso, please, send paperwork for Tomil Exterprises, Inc.

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193 5800.

Thank Jow,

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