	PLEASE READ	ALL INST	RUCTIONS	BEFORE C	OIVIPLE	ING THIS FORM.	•	
AP	PLICATION FOR	47	DEPARTUE Cantira B. 10 ecretary or	T SAE		FILED	· · · · · · · · · · · · · · · · · · ·	
REIN	ISTATEMENT VERSE	Ď	VISION OF CORPO	RATIONS	99	SEP 21 PM 1:38		
DOCUMENT # • P97000062118 1. Corporation Name					SECREMAN OF STATE			
	JSM CORP. OF BOCA	GRANDE			Í			
Puncipal P	Place of Business	Mailing Addr	ess		}			
			ox 1363					
воса	Grande, FL 33921	Boca G	rande, Florie	da 33921 🗼				
	addresses are incorrect in any way, line th					,		
			ng Office Address, If Applicable Box 1363		Date Incorporated or Qualified To Do Business in Florida 7/15/97			
Suite, Apt. #, etc. Suite, Apt. #					5. FEI Numbe		Applied For	
City & State Cit		City & State	City & State Boca Grande, FL		65-	0767226	Not Applicable	
Zip	Country	Zip 33921	Countr	USA	6. CERTIFICAT		dditional Fee required Certificate of Status	
7. Names a	and Street Addresses of Each Officer and	/or Director (Flo	, ——————	···				
Title(s)	Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director		City / State / Zip		Zip	
DPT			3 (Do NOT Use Post Office Box Numbers) 443 W 4th Street		Boca Grande, Florida 33921			
DVS	442 W 443 G					Boca Grande, Florida 33921		
						000029968 -09/27/99-016 ****300.00	722 995-002 ****300.00	
!	B. Name and Address of Current	Registered Age	nt		9. Name and	i Address of New Registered Agen	t	
				Name				
C. Ody Datsel					P.O. Box Number is Not Acceptable)			
	1 Placida Road, Suite 204 lewood, Florida 34223	ł		Suite, Apt. #, Etc.				
Engle wood, Plorida 54525				City State Zip Code				
0 I, being	appointed the registered agent of the ab	ve named corpo	ration, am familiar wi	th and accept the ob	ligations of Sect	FL		
ignalure of egistered A	Agent Agent	Text. C	ENT MUST SIGN			Date 9/20/99		
1. Thi	is corporation owes or hangible Personal Proper	as paid the	e current yea	ar Yes 🔀	IAS PAHD	(See other side for on intangible		
this reins owed by	that I am an officer or director or the rece statement application, the reason for dissor the corporation have been paid and the application is true and accurate, and my si	olution has been i names of√ngividi	eliminated, the corpo vals listed on this for	rate name satisfies t n do not qualify for a	he requirements in exemption und oath.	of section 807.0401 or 617.0401, F	.S., that all fees	
~	SIGNATURE AND TYPED OR PR		IGNING OFFICER OR D	RECTOR	- <u>-</u>	Date Daytimo	Phone #	

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JSM Corp. Of Boca Grande P.O. Box 1865 Boca Grande, Florida 33921

September 20, 1999

Secretary of State Florida Division of Corporations Reinstatement Division P O Box 1500 Tallahassee, Florida 32302-1500

Dear Sirs:

Subject: Reinstatement of JSM Corp of Boca Grande

Last week when a new lessor was doing a credit check on our corporation he advised us that our corporation had been dissolved in late 1998 for non filing of our Annual Return and non payment of related fees.

Obviously we were astounded since we have been carrying on business continuously since inception and have filed all government forms we were aware of including our monthly Florida Sales Tax forms and our annual Florida Tangible Tax returns.

Upon further investigation with our attorneys we found out that the Annual Return Forms had apparently been mailed to our physical address in Boca Grande without inclusion of our P. O. Box # - and therefore were returned to the sender. Boca Grande does not have delivered mail service but up until about two years ago the Post Office used to put mail in the correct P. O. Box even if the Box # was not on the letter.

Since we never received the last two Annual Returns which were mailed to us we would appreciate your waiving the penalty and reinstating our corporate entity for payment of the required filing fees.

Yours very truly.

President

JSM Corp. of Boca Grande