2005 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE:

05 JUN -6 AM 8:41 DOCUMENT # P97000084909 1. Entity Name J & L OF THE PALM BEACHES, INC. Principal Place of Business Mailing Address 901 HYPOLUXO RD. 901 HYPOLUXO RD. LANTANA, FL 33462 LANTANA, FL 33462 2. Principal Place of Business Prosperity Farms Rd Suite, Apt. #, etc. CR2E098 (6/04) 05202005 REIN-P 4. FEI Number City & State Applied For 65-0790622 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MEROLA, JAMES R Street Address (P.O. Box Number is Not Acceptable) STE, 204, 11380 PROPERITY FARMS RD. PALM BEACH GARDENS, FL 33410 City Zip Code FL 8. The above named entity summs this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$900.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE TITLE ☐ Addition 5000561525 06/14/05--01049--009 RUSSO, THEODORE NAME NAME STREET ADDRESS 113 HIDDEN HOLLOW DR. STREET ADDRESS PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-7IP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appears, with all other like empowered.

CER OR DIRECTOR

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J & L OF THE PALM BEACHES, INC.

901 Hypoluxo Road Lantana, Florida 33462

May 25, 2005

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

Attention: Reinstatement

Re: J & L of the Palm Beaches, Inc.

Document No. P97000084909

Gentlemen:

Please be advised that J & L of the Palm Beaches, Inc. never received any notices from the Secretary of State during the year 2004. Therefore, we request that the reinstatement fee for this corporation be waived.

Thank you for your time and consideration in this matter.

Very truly yours,

J & L OF THE PALM BEACHES, INC.

Eiy:

Theodore Russo, Director/Officer