

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000084420

1. Corporation Name

*JAVI INTERNATIONAL AMALGAMATE CORPORATION

Principal Place of Business

Mailing Address

25518 Aysen Drive
Punta Gorda, FL 33983

25518 Aysen Drive
Punta Gorda, FL 33983

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

10/16/97

5. FEI Number

65 0788026

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DPST	Chapman, Vivian	25518 Aysen Drive	Punta Gorda, FL 33983
DV	Boeckel, Alexander	25518 Aysen Drive	Punta Gorda, FL 33983
DVP	Billie, James E.	25518 Aysen Drive	Punta Gorda, FL 33983
			400002722574-3 -12/24/98-01093-023 ****550.00 ****550.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CHAPMAN, VIVIAN
25518 Aysen Drive
Punta Gorda, FL 33983

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. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒

No ☐

(See other side for information
on Intangible tax.)

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 information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Vivian Chapman

Vivian Chapman

December 17, 1998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (1/98)

WILLIAM R. LISCH, P.A.

ATTORNEY AT LAW
519 13TH STREET WEST
BRADENTON, FLORIDA 34205

GENERAL PRACTICE
REAL PROPERTY

TELEPHONE
(941) 747-6658

December 17, 1998

Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Attn: Reinstatement Department

Re: Javi International Amalgamate Corporation

To Whom It May Concern:

It appears that the above referenced corporation had been submitted with the Annual Report in May of this year along with the fee amount of \$550.00 however recently it has come to the attention of the office that the check was never processed nor was the corporation re-instated. A recent call and response from your office indicated return of the enclosed completed re-instatement form along with the annual fee would correct this matter.

Please process the enclosed as soon as possible and forward the Certificate of Good Standing to my office at the above address, (a self addressed stamped envelope has been enclosed for your convenience).

Thank you in advance for all your assistance in this matter.

Sincerely,



William R. Lisch, Esquire

WRL/ltk