


2005 FOR PROFIT CORPORATION REINSTATEMENT

Page 1 of 2

DOCUMENT # P98000031089		
1. Entity Name JEC FLORIDA JITNEY & DOOR TO DOOR TRANSPORTATION, INC.		


FILED

05 NOV -8 PM 1:18

Principal Place of Business C/O LASELLAS CAMMOCK 1507 NW 10TH PL FT LAUDERDALE, FL 33311	Mailing Address C/O LASELLAS CAMMOCK 1507 NW 10TH PL FT LAUDERDALE, FL 33311
---	---

06/29/05 90001 020 15a0

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business 1018 NW 13th Street		3. Mailing Address 1018 NW 13th Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Ft. Lauderdale, FL		City & State Ft. Lauderdale, FL	
Zip 33311	Country USA	Zip 33311	Country USA

10202005 REIN-P CR2E098 (6/04)

4. FEI Number 65-0822969		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CAMMOCK, LASELLAS 1507 NW 10TH PL FT LAUDERDALE, FL 33311		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
--	--	--	--

8. The above named entity submits 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 agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CAMMOCK, LASELLAS 1507 NW 10TH PLACE FT LAUDERDALE, FL 33311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAMMOCK, CLAUDINE 1507 NW 10TH PLACE FT LAUDERDALE, FL 33311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CAMMOCK, BARBARA 1507 NW 10TH PLACE FT LAUDERDALE, FL 33311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMMOCK, ED-MARIE 1507 NW 10TH PLACE FORT LAUDERDALE, FL 33311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMPSON, ALTHEA 2935 NW 5 AVE LAUDERHILL, FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNKLEY, DALE 1507 NW 10TH PLACE FT LAUDERDALE, FL 33311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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 address with all other like empowered.

SIGNATURE:  **Lasellas Cammock** **10/20/2005** **954-822-8638**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Page 2 of 2

JEC FLORIDA JITNEY &
Door to Door Transportation, Inc.

1018 NW 13th Street
Ft. Lauderdale, FL 33311
954-822-8638

October 20, 2005

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

P98000031089

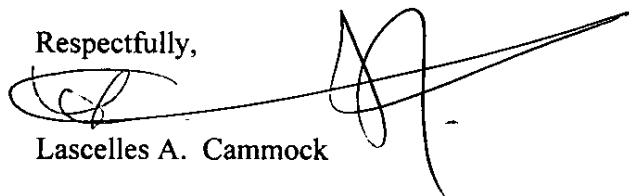
To whom it May Concern:

On February 1, 2005, I mailed a check in the amount of \$150.00 along with the card, and for months did not hear anything from you. In June I received the card from you with the check attached, so we downloaded the form and forwarded it back with the check, at which time the check was cashed by the Department of State, (copy enclosed).

I spoke with Mr. Tyrone Scott concerning this matter on today, October 20, 2005 at 11:40am., I am asking you to please waive the late fees.

Thank you very much for your assistance.

Respectfully,


Lascelles A. Cammock