PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE **CORPORATION** Secretary of State REINSTATEMENT 27 AUG 31 PM 3: 15 DIVISION OF CORPORATIONS DOCUMENT # P98000047160 1. Corporation Name JESSE'S FAMILY RESTAURANT, INC 000109089450 09/06/07~-01<u>003--</u>004, **1200.00 2. Principal Office Address - No P.O. Box # 8331 66TH ST N 3. Mailing Office Address 8331 66TH ST N Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified 05/22/1998 To Do Business in Florida City & State 593479847 PINELLAS PARK, FL PINELLAS PARK, FL Not Applicable Country Country ^z 33781 **6.** CERTIFICATE OF STATUS DESIRED 33781 \$8.75 Additional Fee required for a Certificate of Status 7. Name and Address of Current Registered Agent SULISUFAJ, D. JEMAL The reinstatement fee is imposed, except in circumstances which the entity did not receive 833166TH STREET N the prior notices. By checking this box, you are certifying the prior notices were not Sulte, Apt. #, Etc. received and requesting the reinstatement fee be waived. 33781 **PINELLAS PARK** 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607,0505 or 617,0503, F.S. Signature of Registered Agent Date REGISTERED AGENT MUST SIGN 9. 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 Name of City / State / Zip Officers and/or Directors D D. JEMAL SULISUFAJ 8331 66TH ST N PINELLAS PARK, FL 33781 **ROZA SULISUFAJ** 8331 66TH ST N PINELLAS PARK, FL 33781 REINSTATEMENT (

10. 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 filling 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 contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard C. Stevens, C.P.A.

Richard C. Stevens, C.P.A.

7750 66th Street N. Pinellas Park, FL 33781 TELEPHONE: 727-549-1650 FAX: 727-549-1651

August 31, 2007

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: Jessi's Family Restaurant, Inc. Doc # P98000047160

Enclosed please find a Corporation Reinstatement form for the above Florida corporation.

The company record show that no annual registration forms were received for the years 2004 through 2007. Please adjust the fee and refund any overpayment.

Thank you for your assistance in this matter.

Very truly yours,

Richard C Stevens, CPA (NY)

RCS:jm Encl.

Per conversation with Mr. Richard Stevens, CRA, on 9/4/07 Change i to e in the above corporation to Match Previous records 73 9/4/07