


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

pg 1 of 2

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT

 FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P98000060087**
 1. Corporation Name
JAYWO, INC.

Principal Place of Business	Mailing Address
1080 LINTON BLVD DELRAY BEACH FL 33344	1080 LINTON BLVD DELRAY BEACH FL 33344



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

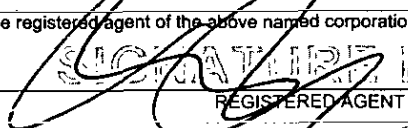
2. New Principal Office Address, If Applicable 1080 Linton Blvd. Suite, Apt. #, etc. # 85 City & State Delray Beach, FL Zip 33344 Country	3. New Mailing Office Address, If Applicable 1080 Linton Blvd. Suite, Apt. #, etc. # 85 City & State Delray Beach, FL Zip 33344 Country	4. Date Incorporated or Qualified To Do Business in Florida 07/01/1998	5. FEI Number 65-0849154 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$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	4 City / State / Zip
D	PRESS, BRIAN	1080 LINTON BLVD # 85	DELRAY BEACH FL 33344

800003478608--9
 -11/28/00--01079--015
 *****150.00 *****150.00

8. Name and Address of Current Registered Agent
PRESS, BRIAN
1080 LINTON BLVD
DELRAY BEACH FL 33344

9. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City State Zip Code
FL

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 **10/16/00**

11. 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date **10/16/00** Daytime Phone # **561-276-3989**

CR2E040 (8/00)

PG 2012

JUSTIN-CRAIG LTD., INC.

October 24th, 2000

Division of Corporations
Florida Department of State
409 E. Gaines Street
Tallahassee, Florida 32399

re: JAYWO, INC.. Document #P98000060087

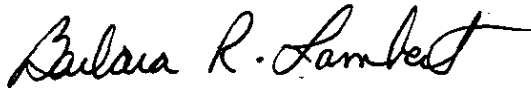
To Whom It May Concern;

The Annual Report for 2000 for the above-referenced corporation was originally mailed in April 2000 along with a check in the amount of \$150.00. My client never received a second notice, but he has received the Application for Reinstatement, enclosed. It was at this time that he realized the check from April had not been negotiated. I personally mailed this report and check in April.

Per a phone conversation with a gentleman in the reinstatement department, if I sent a letter explaining this, the annual report would be accepted and processed for the original \$150.00 filing fee. I have made a correction to the address by adding the suite number, which I notice is missing from the original report.

Please accept the filing fee of \$150.00 and show this corporation active.

Sincerely,



Barbara R. Lambert
President