

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED

00 MAY -8 AM 7:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

P98000066678

1. Corporation Name

ABCCDJJPS Enterprises, Inc  
P98000066678

2. Principal Office Address

18260 N.E. 19th Ave.

Suite, Apt. #, etc.

Suite 204

City & State

North Miami Beach, FL

Zip

33162

Country

U.S.A.

3. Mailing Office Address

18260 N.E. 19th Ave.

Suite, Apt. #, etc.

Suite 204

City & State

North Miami Beach, FL

Zip

33162

Country

U.S.A.

**REINSTATEMENT 99-00**

4. Date Incorporated or Qualified  
To Do Business in Florida

July 27, 1998

5. FEI Number

65-0863162

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Jerry C. Guglielmo

Street Address (P.O. Box Number is Not Acceptable)

2450 N.E. 15th Ave.

Suite, Apt. #, Etc.

Apt # 208

City

Wilton Manors

State

FL

Zip Code

33305

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

Jerry C. Guglielmo

REGISTERED AGENT MUST SIGN

Date February 21, 2000

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	JERRY C. GUGLIELMO	2450 N.E. 15th Ave. apt. 208	Wilton Manors, FL 33305

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 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:

Jerry C. Guglielmo

JERRY C. GUGLIELMO

2-21-2000

(305) 945-0606

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #