

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

bf2

CORPORATION



FLORIDA DEPARTMENT OF STATE

Reinstatement
Division of Corporations

FILED

01 FEB -5 AM 11:30

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P980000069190

1. Corporation Name

J.C.R. INTERNATIONAL INC.

2. Principal Office Address

1328 SW 19th AVE

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

SAME

City & State

FORT LAUDERDALE FL.

City & State

SAME

Zip

33312.

Country

USA.

Zip

SAME

Country

SAME

4. Date Incorporated or Qualified
To Do Business in Florida

8/98

5. FEI Number

65-0880690

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

D. ATHERSTONE

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

1328 SW 19th AVE

Suite, Apt. #, Etc.

City

FORT LAUDERDALE

State

FL

Zip Code

33312.

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

D. Atherstone

Date 01/06/01

REGISTERED AGENT MUST SIGN

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
C.	B. WATKINS	25 HACIENDA	RICHMOND BAY SA. 3880
M.	D. ATHERSTONE	1328 SW 19th AVE	FORT LAUDERDALE 33312.
			500003677055-5 -02/13/01--01071--019 ****150.00 ****150.00
			KE

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:

B. Watkins
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/06/01 954-5255347
Date Daytime Phone #

CR2E081 (9/99)

**J.C.R.
INTERNATIONAL
INC**

J.C.R.
INTERNATIONAL
INC
1328 SW 19th AVENUE
FORT LAUDERDALE
FL 33312

Tel: (954) 5255347
Fax: (954) 5255347

August 20, 2000

DEPARTMENT OF STATE

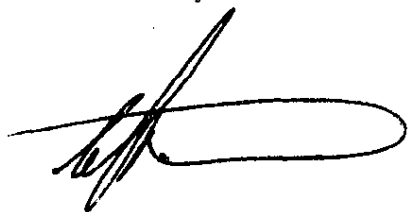
Dear Sir or Madam:

In May 1999 I changed premises and unfortunately some of my mail was not forwarded. Due to this I did not receive the uniform business report, and therefore did not forward the necessary documentation to you.

During this period the corporation has been inactive as I have been overseas. I therefore respectfully request that you waive the penalties incurred.

Hoping this meets with your approval.

Yours truly



Barry Watkins
President