

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

07 MAR 27 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000095424

1. Corporation Name

JULMAD RETAIL SERVICES, INC.

2. Principal Office Address
236-250 Greenpoint Avenue

3. Mailing Office Address
Pavia & Harcourt, 600 Madison Av

Suite, Apt. #, etc.

Suite, Apt. #, etc.
12th floor

City & State
Brooklyn, New York

City & State
New York, NY

Zip
11222

Country
USA

Zip
10025

Country
USA

REINSTATEMENT 03-07
CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida 11/12/1998

5. FEI Number
522129694

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
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, Etc.

City
Tallahassee

State
FL

Zip Code
32301-2525

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**

Michael Cambard

Michael Cambard
Asst. Vice President

Date 3/21/07

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
P/D	Steven Siegler	236-250 Greenpoint Avenue	Brooklyn, NY 11222
VP/D	Jay McLaughlin	236-250 Greenpoint Avenue	Brooklyn, NY 11222
VP/D	Kevin McLaughlin	236-250 Greenpoint Avenue	Brooklyn, NY 11222
S	Jordan E. Ringel	600 Madison Ave., 12th Floor	New York, NY 10022

600095785866
04/04/07--01027--017 **1350.00

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 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:

Jordan E. Ringel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jordan E. Ringel, Secretary

Date

3/21/07

212-508-2310

Daytime Phone #

204/2