

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 NOV -5 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000095955

1. Corporation Name

JONTARA ENTERPRISES, INC.

Principal Place of Business

Mailing Address

19331 NE 18TH COURT
NORTH MIAMI BEACH FL 33179

19331 NE 18TH COURT
NORTH MIAMI BEACH FL 33179

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/09/1998

5. FEI Number

06-5314279

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	JAVAHERIAN, ABOOLMAJIZ	19331 NE 18TH COURT	NORTH MIAMI BEACH FL 33179

000004698100--7
-11/29/01--01041--008
***150.00 ***150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JAVAHERIAN, ABOOLMAJIZ
19331 NE 18TH COURT
NORTH MIAMI BEACH FL 33179

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/01)

Jontara Enterprises, Inc.

Phone 305-915-0050
Fax 954-969-1653

19331 NE 18th Court
N. Miami, FL 33179

FILED

01 NOV -5 PM 5:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
November 01, 2001

Division of Corporations
Florida Dept. of State
PO Box 6327
Tallahassee, FL 32314-6327

To: Whom It May Concern:

Re: Annual Report:

I am writing you this letter in reference to my conversation with your office today regarding my Corporate Renewal. I sent in my Corporate renewal on March 28, 2001. I was unaware that you did not receive it. Your office stated that after the first renewal goes out if it is not renewed a second notice goes out. I never received a second notice. I checked with the bank although my check never cleared it was check # 12224. I was told by your office to mail this letter with a check for \$ 150.00 and my renewal. I am always on time with my paperwork and I did mail it to your office on time.

If you have any questions please contact me at the above number. Thank you.

Sincerely,

Aboolmajiz Javaherian