

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FLORIDA DEPARTMENT OF STATE



Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -4 PM 2:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOR REINSTATEMENT

DOCUMENT # P99000035286

1. Corporation Name

J.B. OF SOUTH FLORIDA, INC.

Principal Place of Business

Mailing Address

19015 NE 2ND AVE  
1511  
N MIAMI FL 33179

19015 NE 2ND AVE  
1511  
N MIAMI 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

4. Date Incorporated or Qualified  
To Do Business in Florida

04/16/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. FEI Number

65-0912951

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
P	BLUMBERG, JEFF	19015 NE 2ND AVE	N MIAMI FL 33179

200008790882  
11/04/02--01101--008 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BLUMBERG, JEFF  
19015 NE 2ND AVE  
N MIAMI 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. or 617.0505, F.S.

Signature of  
Registered Agent

*Jeffrey Blumberg*  
SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

10/31/02

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:

*Jeffrey Blumberg*  
SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEFFREY BLUMBERG  
10/31/02 (305) 651-5182  
Date Daytime Phone #

CR2E040 (8/02)

10/31/02

Dear sir,

My name is JEFFREY Blumberg,  
I started a small corporation in  
1998, I have a C.P.A. to guide my  
every financial actions and I am  
under an "offer & compromise" with  
the Internal Revenue Service for the  
last 2 years — one of their  
stipulations is "that all taxes, etc...  
must be paid on time or my deal  
is off." I am very careful to pay  
my bills in full and on time.

I mention all of this before  
I say to you that this notice is  
the first that I have  
received for this year. I would like  
you to waive the late fees - please.